

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004545

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Entity Name:** LAKE FISCHER ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

9229 LAKE FISCHER BLVD.  
GOTHA, FL 34734 US

**New Principal Place of Business:**

9102 LAKE FISCHER BLVD.  
GOTHA, FL 34734 US

**Current Mailing Address:**

C/O LIGHTHOUSE MGMT. & CONSULTING  
P.O. BOX 0774  
WINDERMERE, FL 34786 US

**New Mailing Address:**

**FEI Number:** 59-3471341      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, P.A.  
ATTN: C. JOHN CHRISTENSEN, ESQ.  
2500 MAITLAND CENTER PKWY, SUITE 209  
MAITLAND, FL 32751 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LANGLEY, DAN  
Address: 9229 LAKE FISCHER BLVD  
City-St-Zip: GOTHA, FL 34734

Title: SD  
Name: MULONE, MARY BETH  
Address: 9109 LAKE FISCHER BLVD  
City-St-Zip: GOTHA, FL 34734

Title: PD  
Name: CHYLINSKI, DAVID  
Address: 9102 LAKE FISCHER BLVD  
City-St-Zip: GOTHA, FL 34734

Title: DT  
Name: JARAMILLO, JAIME  
Address: 9108 LAKE CONVENTRY COURT  
City-St-Zip: GOTHA, FL 34734

Title: VPD  
Name: MANDESE, MARK  
Address: 234 LAKE DARBY PLACE  
City-St-Zip: GOTHA, FL 34734

Title: D  
Name: TOTARAM, DOREEN  
Address: 9030 LAKE FISCHER BLVD  
City-St-Zip: GOTHA, FL 34734

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID CHYLINSKI

PD

03/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date