

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006354

FILED  
Apr 20, 2006  
Secretary of State

**Entity Name:** LAKE FANTASIA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8350 FANTASIA PARK WAY  
RIVERVIEW, FL 33569 US

**New Principal Place of Business:**

**Current Mailing Address:**

12401 N. 22ND ST.  
H-304  
TAMPA, FL 33612 US

**New Mailing Address:**

**FEI Number:** 59-3545911

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOEHRING, ROLAND A  
12401 N. 22ND ST. H-304  
TAMPA, FL 33612 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: DVST ( ) Delete  
Name: GOEHRING, ROLAND A  
Address: 12401 N. 22ND ST. H-304  
City-St-Zip: TAMPA, FL 33612

Title: DVP ( ) Delete  
Name: BARFIELD, JIM  
Address: 8350 FANTASIA PARKWAY  
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete  
Name: KELLY, PETER J  
Address: 100 S. ASHLEY DR., STE 1300  
City-St-Zip: TAMPA, FL 336013333

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROLAND A. GOEHRING

PRES

04/20/2006

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

\_\_\_\_\_  
Date