

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003604

FILED  
Apr 09, 2007  
Secretary of State

Entity Name: PERLE DU LAC CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

660 OSCEOLA AVENUE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

660 OSCEOLA AVENUE  
WINTER PARK, FL 32789

**Current Mailing Address:**

660 OSCEOLA AVENUE  
BOX 16  
WINTER PARK, FL 32789

**New Mailing Address:**

660 OSCEOLA AVENUE  
BOX #16  
WINTER PARK, FL 32789

FEI Number: 59-3645158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PIETROWSKI, JOANNA  
660 OSCEOLA AVE  
BOX 16  
WINTER PARK, FL 32789 US

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

PIETROWSKI, JOANNA PRO MAN  
660 OSCEOLA AVE  
BOX 16  
WINTER PARK, FL 32789 US

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: JOANNA PIETROWSKI

04/09/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KRISTAL, RAY  
Address: 662 OSCEOLA AVE #201  
City-St-Zip: WINTER PARK, FL 32789

Title: S ( ) Delete  
Name: CHUPLIS, JOHN  
Address: 660 OSCEOLA AVE #105  
City-St-Zip: WINTER PARK, FL 32789

Title: T ( ) Delete  
Name: POPPLE, JOSEPH P  
Address: 664 OSCEOLA AVE #302  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: LIVINGSTONE, RON  
Address: 664 OSCEOLA AVE #301  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: KNUOSEN, LIZ  
Address: 660 OSCEOLA AVE #104  
City-St-Zip: WINTER PARK, FL 32789

**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:

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: JOSEPH POPPLE

T

04/09/2007

Electronic Signature of Signing Officer or Director

Date