

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION
ANNUAL REPORT
1989



FLORIDA DEPARTMENT OF STATE
Jeri Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

ZIP + 4

910000000947
LAMPLIGHTER VILLAGE HOME OWNERS ASSOC., INC. PHA
552 WATERFRONT
MELBOURNE, FL. 32935-8039

2 Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

07/28/89 00096 013

P.O. Box Number 35

ANNUAL REPORTS \$40

ANNUAL REPORT 5

CITY AND STATE CERT/PHOTO COPY 5

Zip Code 24

40

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

3 Date Incorporated or Qualified To Do Business in Florida

10/27/1986

4 Federal Employer Identification Number (FEIN)

36-27050-14

5 Date of Last Report

07/25/1988

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1988

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
P/D	BUSHAW, BERNARD	481 WINDSHORE CT.	MELBOURNE, FL.
V/P/D	CLENDENIN, DENZIL	534 WATERFRONT ST.	MELBOURNE, FL.
9d	WYSOCKI, ELEONORE	552 WATERFRONT ST.	MELBOURNE, FL.
T/D	OSSE, NICHOLAS	487 WATERBROOK ST.	MELBOURNE, FL.
T/D	Barre, Sandra	480 Windshore Ct.	Melbourne, Fl.
D	Barre, Michael	480 Windshore Ct.	Melbourne, Fl.
D	Delbert Cornett, Delbert	573 Wainsbrook Pl.	Melbourne, Fl.
C	Koob, Fred	484 Waterbrook St.	Melbourne, Fl.
D	Cornett, Delbert	573 Wainsbrook Pl.	Melbourne, Fl.

REGISTERED AGENT INFORMATION

8 Name and Address of New Registered Agent

Name 81

7 Name and Address of Current Registered Agent

WYSOCKI, ELEONORE
552 WATERFRONT ST.
MELBOURNE, FL. 32935

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

Zip Code 85

FL

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of Section 607.325 F.S.

800166219168

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

10 If a foreign corporation, date first transacted business in Florida

11

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.

(Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.)

(Officer or Director signing must be listed in Block 6.)

Signature Eleonore M. Wysocki	Date 6/27/89
Typed Name of Signing Officer or Director Eleonore M. Wysocki	Telephone Number 407-723-2464
Title Secretary	

12 Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED



\$5 Additional Fee required for a Certificate of Status.