FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 24 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 753371 (4)

1. Corporation Name

LAKE OLYMPIC TOWNHOUSES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~POST OFFICE BOX 73~~ ~~ORLANDO FL 32878~~	~~POST OFFICE BOX 73~~ ~~ORLANDO FL 32878~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/16/1980
3a. Date of Last Report: 11/03/1994
4. FEI Number: 59-2500128 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Florida Mgmt Serv	26
Suite, Apt. #, etc. 22 918 Bradshaw Ter	Suite, Apt. #, etc. 27 P.O. Box 73
City & State 23 Orlando, Fl	City & State 28 Orlando, Fl
Zip / Country 24 32806 / 25 Orange	Zip / Country 29 32802 / 30 Orange

9. Name and Address of Current Registered Agent

~~BAILEY, NEIL~~
C/O FLORIDA MANAGEMENT SERVICES, INC.
918 BRADSHAW TERRACE
ORLANDO FL 32806

10. Name and Address of New Registered Agent

81 Name: Anita Bailey
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] DATE 4/13/95
Signature(s) and printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	STENGER, JOHN	1.2 NAME	
STREET ADDRESS	618 OLYMPIC DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	OCOEE FL 34761	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	☐ Change ☐ Addition
NAME	ZAHND, REBECCA	2.2 NAME	
STREET ADDRESS	625 OLYMPIC DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	OCOEE FL 34761	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	☐ Change ☐ Addition
NAME	QUINTANA, WILLIAM	3.2 NAME	
STREET ADDRESS	635 OLYMPIC DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	OCOEE FL 34761	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	☐ Change ☐ Addition
NAME	REGAN, DOROTHY	4.2 NAME	
STREET ADDRESS	629 OLYMPIC DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	OCOEE FL 34761	4.4 CITY-ST-ZIP	
TITLE	~~D~~	5.1 TITLE	☐ Change ☑ Addition
NAME	DALBOW, HERBERT	5.2 NAME	
STREET ADDRESS	616 OLYMPIC DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	OCOEE FL 34761	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☑ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

~~SIGNATURE~~ [signature] ~~OF CHAIRMAN, VICE CHAIRMAN OF THE BOARD, PRESIDENT OR OTHER OFFICER OR DIRECTOR~~
~~SIGNATURE AND TYPED OR PRINTED NAME OF CHAIRMAN, VICE CHAIRMAN OF THE BOARD, PRESIDENT OR OTHER OFFICER OR DIRECTOR~~ Date Daytime Phone #

0004087