

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012711

FILED
Mar 09, 2006
Secretary of State

Entity Name: LEE VISTA SQUARE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1241 SEMORAN BOULEVARD
SUITE 185
CASSELBERRY, FL 32707

New Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

Current Mailing Address:

1241 SEMORAN BOULEVARD
SUITE 185
CASSELBERRY, FL 32707

New Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

FEI Number: 55-0913135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEEMAN, WALTER D JR.
1241 SEMORAN BOULEVARD
SUITE 185
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: JAMES W HART JR

03/09/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Change (X) Addition
Name: STAPP, WES
Address: 101 SOUTHALL LN STE 400
City-St-Zip: MAITLAND, FL 32751

Title: SD () Change (X) Addition
Name: BEEMAN, WALT
Address: 101 SOUTHALL LN STE 400
City-St-Zip: MAITLAND, FL 32751

Title: TD () Change (X) Addition
Name: SERGI, ERIC
Address: 101 SOUTHALL LN STE 400
City-St-Zip: MAITLAND, FL 32751

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: WES STAPP

PD

03/09/2006

Electronic Signature of Signing Officer or Director

Date