

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002849

FILED
Apr 19, 2006
Secretary of State

Entity Name: LAKE UNDERHILL PINES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

172 PINE ARBOR DRIVE
ORLANDO, FL 32825

New Principal Place of Business:

509 S. CHICKASAW TRAIL
#383
ORLANDO, FL 32825

Current Mailing Address:

425 S. CHICKASAW TRAIL
#383
ORLANDO, FL 32825

New Mailing Address:

509 S. CHICKASAW TRAIL
#383
ORLANDO, FL 32825

FEI Number: 59-3423320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACREE II, W CLEVELAND
701 PEACHTREE ROAD
ORLANDO, FL 32804 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: PD () Delete
Name: ACREE, II, W CLEVELAND
Address: 172 PINE ARBOR DRIVE
City-St-Zip: ORLANDO, FL 32825

Title: TD () Delete
Name: BAIR, RANDY E
Address: 180 PINE ARBOR DRIVE
City-St-Zip: ORLANDO, FL 32825

Title: SD () Delete
Name: BRILL, DEAN
Address: 234 PINE ARBOR DRIVE
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: ALLISON, GERALD L
Address: 63 PINE ARBOR DRIVE
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: PAYNE, BONNIE J
Address: 156 PINE ARBOR DRIVE
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: MARTINEZ, MADELINE
Address: 107 UNDERHILL LOOP DRIVE
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: HYERS, SHEILA
Address: 234 PINE ARBOR DRIVE
City-St-Zip: ORLANDO, FL 32825

Title: VD (X) Change () Addition
Name: CUNNINGHAM, DWIGHT
Address: 251 PINE ARBOR DRIVE
City-St-Zip: ORLANDO, FL 32825

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: W CLEVELAND ACREE II

PD

04/19/2006

Electronic Signature of Signing Officer or Director

Date