

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724261

Entity Name: LAKE APARTMENTS ASSOCIATION, INC.**Current Principal Place of Business:**5516 COMMERCE DRIVE
SUITE B100
ORLANDO, FL 32839**Current Mailing Address:**PO BOX 568846
ORLANDO, FL 32856-8846**FEI Number:** 59-1440935**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**P AND R HOUSING MANAGEMENT CORP.
5516 COMMERCE DRIVE
SUITE B100
ORLANDO, FL 32839 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	CAMPBELL, BRUCE
Address	4270 D LAKE UNDERHILL RD
City-State-Zip:	ORLANDO FL 32803

Title	T
Name	STOWE, DOROTHY
Address	4316 D LAKE UNDERHILL RD
City-State-Zip:	ORLANDO FL 32803

Title	D
Name	RHEA, RUTH
Address	4270 C LAKE UNDERHILL RD
City-State-Zip:	ORLANDO FL 32803

Title	DIRECTOR
Name	STINSON, RUTH
Address	4256 D LAKE UNDERHILL ROAD
City-State-Zip:	ORLANDO FL 32803

Title	VP
Name	JOHNSON, JOYCE
Address	4314 C LAKE UNDERHILL RD
City-State-Zip:	ORLANDO FL 32803

Title	S
Name	BOUCHARD, ELAINE
Address	4386 A LAKE UNDERHILL RD.
City-State-Zip:	ORLANDO FL 32803

Title	D
Name	WILSON, GARY
Address	4256 A LAKE UNDERHILL RD
City-State-Zip:	ORLANDO FL 32803

Title	DIRECTOR
Name	ALMEIDA, ANDREA
Address	4206 A LAKE UNDERHILL ROAD
City-State-Zip:	ORLANDO FL 32803

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I hereby 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 all other like empowered.

SIGNATURE: BRUCE CAMPBELL**PRESIDENT****01/30/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WILLIAMS, JOHN
Address	4202 B LAKE UNDERHILL ROAD
City-State-Zip:	ORLANDO FL 32803