## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#710579**

FILED Jan 06, 2006 Secretary of State

Entity Nam	ie: LAKE COU	NTY EDUCATION ASSOCIAT	FION, INC	D.,				
Current Principal Place of Business:				New Principal Place of Business:				
1707 SOUT N/A LEESBURG		US						
Current Mailing Address:				New Mailing Address:				
PO BOX 49 N/A LEESBURG	0816 5, FL 34749081	6 US						
FEI Number:	59-0182681	FEI Number Applied For ( )	FEI Numl	ber Not Applic	cable ( )	Certifica	ate of Status Desire	ed ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
ALLEN, DONALD L P 1707 SOUTH STREET N/A LEESBURG, FL 34748 US				BURTNETT, PAMELA A P 1707 SOUTH STREET N/A LEESBURG, FL 34748 US				
The above r in the State		bmits this statement for the pu	ırpose of	changing its	s registered	d office or r	egistered agent,	or both,
SIGNATUR	E: PAM BURT		01/06/2006					
	Electronic	Signature of Registered Ager	nt				Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	T () D WEST, KAREN A P.O. BOX 784 LEESBURG, FL		1	Title: Name: Address: City-St-Zip:		() Change	( ) Addition	
Title: Name: Address: City-St-Zip:	S () D STROW, KIM S P.O. BOX 151 HOWEY, FL 347	elete 37 US	1	Title: Name: Address: City-St-Zip:		() Change	( ) Addition	
Title: Name: Address: City-St-Zip:	V () C BURTNETT, PAM 741 E. 8TH AVEN MOUNT DORA, F	UE	1	Title: Name: Address: City-St-Zip:	GRASSEL, E	JUNIETTA I		
Title: Name: Address: City-St-Zip:	P () C ALLEN, DONALD 2909 JOANNA DR EUSTIS, FL 3272	RIVE	1	Title: Name: Address: City-St-Zip:	741 8TH AVI	(X) Change PAMELA A F ENUE RA, FL 3275		

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: PAM BURTNETT Ρ 01/06/2006