FILE NOW: FILING FEE IS \$61.25

FILED May 05 1998 8:00am **NONPROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name (8)718960 LAKE CAY DEE ENVIROMENTAL ASSOCIATION Principal Place of Business Mailing Address 3100 RAVEN ROAD 3100 RAVEN ROAD 3. Date Incorporated or Qualified C/O WAYNE H. SMITH C/O WAYNE H. SMITH 08/05/1970 ORLANDO FL 32803 ORLANDO FL 32903 4. FEI Number Applied For 59-1960075 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 21 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 30 Personal Property Tax due June 30. 24 25 20 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SMITH, WAYNE H. 82 Street Address (P.O. Box Number is Not Acceptable) 3100 RAVEN ROAD 83 ORLANDO, FL. ORLANDO FL 32803 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature, typed or 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 DELETE Change Addition TITLE 1.5 TITLE NAME SMITH, WAYNE H. 1.2 NAME 3100 RAVEN ROAD STREET ADDRESS 1.3 STREET ADDRESS <u>ORLANDO</u> FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME DALEY, CLAIRE B. 2.2 NAME STREET ADDRESS **1635 FALCON DRIVE** 2.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 3.1 TITLE SMITH, B. DIANE NAME 3.2 NAME 3100 RAVEN ROAD STREET ADORESS 3.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Change ☐ Addition TITLE DELETE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change ☐ Addition TITLE DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 truffand 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 repoliver or trustee employered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed 0) on an adjustment with an adjustment.

SIGNATURE: