

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722370

FILED  
Mar 30, 2006  
Secretary of State

**Entity Name:** GEORGE'S LAKE HOME AND PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

114 SARASOTA STREET  
FLORAHOME, FL 32140 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 237  
FLORAHOME, FL 321400237 US

**New Mailing Address:**

**FEI Number:** 59-2556359

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COOPER, DOROTHY A  
P.O. BOX 306  
FLORAHOME, FL 32140 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: PDD ( ) Delete  
Name: STARLING, KENNETH  
Address: P.O. BOX 486  
City-St-Zip: FLORAHOME, FL 32140

Title: VPD ( ) Delete  
Name: CASTLEBERRY, RAY  
Address: 839 HILLSBOROUGH AVE.  
City-St-Zip: FLORAHOME, FL 32140

Title: TD ( ) Delete  
Name: CHITTY, EDWINA  
Address: 119 POCAHONTAS RD.  
City-St-Zip: FLORAHOME, FL 32140

Title: SD ( ) Delete  
Name: COOPER, DOROTHY A  
Address: P.O. BOX 306  
City-St-Zip: FLORAHOME, FL 32140

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDD (X) Change ( ) Addition  
Name: CASTLEBERRY, RAY  
Address: 839 HILLSBOROUGH AVENUE  
City-St-Zip: FLORAHOME, FL 32140

Title: VPD (X) Change ( ) Addition  
Name: CHITTY, BILL  
Address: 119 POCAHONTAS RD.  
City-St-Zip: FLORAHOME, FL 32140

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: DOROTHY COOPER

SD

03/30/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date