

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727040

FILED  
Apr 27, 2008  
Secretary of State

**Entity Name:** LAKES AREA PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1503 E. CROOKED LAKE DRIVE  
EUSTIS, FL 32726

**New Principal Place of Business:**

**Current Mailing Address:**

1503 E. CROOKED LAKE DRIVE  
EUSTIS, FL 32726

**New Mailing Address:**

**FEI Number:** 23-7362672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GERMAIN, MARK F  
2305 HUTCHINSON AVE  
LEESBURG, FL 34748 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: ERICKSON, ROBERT A  
Address: 1503 E. CROOKED LAKE DR  
City-St-Zip: EUSTIS, FL 32726

Title: D ( ) Delete  
Name: CONOVER, CHARLES  
Address: 16943 OLD MT. DORA RD  
City-St-Zip: EUSTIS, FL 32726

Title: VPD ( ) Delete  
Name: PATROWICZ, TULLY  
Address: 1700 COUNTRY CLUB RD  
City-St-Zip: EUSTIS, FL 32726

Title: SD ( ) Delete  
Name: LEWIS, WALTER  
Address: 1707 E CROOKED LAKE DR  
City-St-Zip: EUSTIS, FL 32726

Title: TD ( ) Delete  
Name: GRAY, RUTH  
Address: 33325 E LAKE JOHANNA  
City-St-Zip: EUSTIS, FL 32726

Title: D ( ) Delete  
Name: MUTTON, MARGERIE  
Address: 2850 E. CROOKED LAKE DR  
City-St-Zip: EUSTIS, FL 32726

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

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

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

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

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

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 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: ROBERT A. ERICKSON

O/D

04/27/2008

Electronic Signature of Signing Officer or Director

Date