

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731179

FILED
Jan 08, 2006
Secretary of State

Entity Name: LYME BAY COLONY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2100 40TH STREET
ORLANDO, FL 328397507

New Principal Place of Business:

Current Mailing Address:

2100 40TH STREET
ORLANDO, FL 328397507

New Mailing Address:

FEI Number: 59-1640438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUNSCHWIG, CORRINE
200 BALD CYPRESS CRT
LONGWOOD, FL 32779 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: T () Delete
Name: BRUNSCHWIG, CORRINE
Address: 200 BALD CYPRESS CT
City-St-Zip: LONGWOOD, FL 32779

Title: P () Delete
Name: COOK, MINGTOY
Address: 741 CITRUS COVE DR
City-St-Zip: WINTER GARDEN, FL 34787

Title: VPT () Delete
Name: BRUNSCHWIG, THIERRY
Address: 200 BALD CYPRESS COURT
City-St-Zip: LONGWOOD, FL 32779

Title: ST () Delete
Name: HAGAN, WILLIAM C
Address: 3922 CORONATION CT
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: THOMAS, DAVID
Address: RT 2 BOX 2786
City-St-Zip: PIEDMONT, MO 63957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change () Addition
Name: BRUNSCHWIG, THIERRY
Address: 200 BALD CYPRESS COURT
City-St-Zip: LONGWOOD, FL 32779

Title: D (X) Change () Addition
Name: HAGAN, WILLIAM C
Address: 3922 CORONATION CT
City-St-Zip: ORLANDO, FL 32839

Title: VP (X) Change () Addition
Name: SHELburn, ROBERT
Address: 3903 CORONATION COURT
City-St-Zip: ORLANDO, FL 32839

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: CORINNE BRUNSCHWIG

T

01/08/2006

Electronic Signature of Signing Officer or Director

Date