

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90301 024 ****61.25

DOCUMENT # 732803 1. Entity Name NORTH LAKE ASSOCIATION, INC.					
Principal Place of Business 1603 BUNKER HILL DRIVE SUN CITY CENTER, FL 33573 US			Mailing Address 1603 BUNKER HILL DRIVE SUN CITY CENTER, FL 33573 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 59-2145794 Applied For ☐ Not Applicable	
Country		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCHEMENAUER, PAUL W 1603 BUNKER HILL DR SUN CITY CENTER, FL 33573				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANTHER, JACK 1402 BRATTLEBORO CIR SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LILES, PHYLLIS 1623 BUNKER HILL DRIVE SUN CITY CENTER, FL 33573	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Carol Marshall 1415 Seton Hall Dr. Sun City Center, FL 33573	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HORTON, BEVERLY G 1710 N PEBBLE BCH BLVD SUN CITY CENTER, FL 33573	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Nan Baytos 1416 Nashua Cir Sun City Center, FL 33573	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ZVP NODLAND, JOYCE 1413 SETON HALL SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GAITHER, SANDY 1415 NASHUA CIR SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VP ANDERSON, BRUCE 1609 MONMOUTH SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Sandra Gaither</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <i>4-7-06</i> Daytime Phone #		

SANDRA GAITHER