## **2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT #734346**

1. Entity Name LAKE MARY COMMUNITY IMPROVEMENT ASSOCIATION, INC.



**FILED** Apr 24, 2006 8:00 am Secretary of State 04-24-2006 90344 042 \*\*\*\*61.25

Suris, Apr. II. etc.   Surise Apr. III.   Surise Ap	Principal Place of Business 260 N. COUNTRY CLUB RD PO BOX 950622 LAKE MARY, FL 32795-0622 US			Mailing Address 260 N. COUNTRY CLUB RD PO BOX 950622 LAKE MARY, FL. 32795-0622 US				60928859						
City & State  Country  Country  Country  Country  Country  Country  Country  S. Continease of State Desired  8. Name and Address of Current Registered Agent  Name  City & State  Name  Dunaway, Alma  Steer Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied For  Not Applicable  Size Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied Address (P.O. Box Number is Not Acceptable)  Lake Mary  FL  Supplied Address (P.O. Box Number is Not Acceptable)  Lake Mary	2. Principal Place of Business			3. Mailing Address										
Specificate of Satus Desired   Sp. 158 Assume and Address of Current Registered Agent   Sp. Certificate of Satus Desired   Sp. 75 Assument Foo Required	Suite, Apt. #, etc.			Suite, Apt. #, etc.				04012006	Chg-NP	CR2E	037 (11/	05)		
Fee Required   Fee	City & State	9	City & State			*		4. FEI Number 59-1639	544			<del></del>		
Name   Dunaway, Alma	Zip	Country	Zip		ntry		5. Certificate of Status Desired					\$8.75 Additional Fee Required		
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LAKE MARY, FL 32746  1.54 N. Lake Street  City Lake Mary  FL 292446  8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE  STILING Fee is \$61.25  Due by May 1, 2006  Due by May 1, 2006  TITLE  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  MAKE  GRACEY, DOLORES A  STREET ADDRESS  ASTREET ADDRESS  CITY-ST-2P  LAKE MARY, FL 32746  TITLE  SIGNATURE  STREET ADDRESS  TOTS ALMYRA DRIVE  CITY-ST-2P  LAKE MARY, FL 32746  TITLE  SPECIAL STREET ADDRESS  CITY-ST-2P  LAKE MARY, FL 32746  TITLE  WAME  GRIFFIN, LILLIAN  GRIFFIN,	ROYAL, JACALYN J				Du									
City   Lake   Mary   FL   32746				Street Address			<u> </u>	(P U. Box Number is Not Acceptable)						
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE Superur, typed up think name of inquised agent with a florability.  Alma Dunaway, TD  4-21-2006  DATE  Filing Fee is \$61.25  Due by May 1, 2006  9. Election Campaign Financing Trust Fund Contribution.  Trust Fund Contribution.  Delete Trust Fund Contribution.  TITLE  NAME STREET ADDRESS  OFFICERS AND DIRECTORS IN 10  TITLE  NAME STREET ADDRESS  TO OFFICERS AND DIRECTORS IN 10  TITLE  NAME STREET ADDRESS  TO OFFICERS AND DIRECTORS IN 10  Change Addition  NAME STREET ADDRESS  TO OFFICERS AND DIRECTORS IN 10  TITLE  NAME STREET ADDRESS  TOP'S-1-2P  TITLE  NAME STREET ADDRESS  CITY-S1-2P  Addition  NAME STREET ADDRESS  CITY-S1-2P  Addition  NAME STREET ADDRESS  CITY-S1-2P  Delete  TITLE NAME STREET ADDRESS  CITY-S1-2P  Delete STREET ADDRESS  CITY-S1-2P  Change Addition  NAME STREET ADDRESS  CITY-S1					}	City — Zin Code								
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I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. Further certify that I are 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 are no fifteer 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 attachapten with an address, with all other-like empowered.

SIGNATURE/

4-21-2006

407 322-2154