

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749407

FILED  
May 02, 2006  
Secretary of State

**Entity Name:** LUCERNE OAKS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O BETH PALMER  
13627 DORNOCH DR  
ORLANDO, FL 32828

**New Principal Place of Business:**

2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 32779

**Current Mailing Address:**

C/O BETH PALMER  
13627 DORNOCH DR  
ORLANDO, FL 32828

**New Mailing Address:**

2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 32779

**FEI Number:** 51-2193569      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PROPERTY FIRST, INC.  
13627 DORNOCH DR  
ORLANDO, FL 32828      US

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

HART, JUAMES W JR  
SENTRY MANAGEMENT INC  
2180 W SR 434 SUITE 5000  
LONGWOOD, FL 32779 US

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: JAMES W HART JR

05/02/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DVP      ( ) Delete  
Name: DIVECCHO, PHILIP  
Address: 134 W AMERICA ST, # 30  
City-St-Zip: ORLANDO, FL 32801

Title: TD      ( ) Delete  
Name: HALL, MOANA KAY  
Address: 1421 CANCELOT WAY  
City-St-Zip: CASSELBERRY, FL 32707

Title: PD      ( ) Delete  
Name: AREND, MARK  
Address: 125 WAMERICA ST., APT #16  
City-St-Zip: ORLANDO, FL 32801

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

Title: PD      (X) Change ( ) Addition  
Name: HALL, MOANA  
Address: 1471 LANCELOT WAY  
City-St-Zip: CASSELBERRY, FL 32707

Title: TD      (X) Change ( ) Addition  
Name: SPEICHER, MARK  
Address: 128 W AMERICA ST #24  
City-St-Zip: ORLANDO, FL 32801

Title: SD      (X) Change ( ) Addition  
Name: ARREND, MARK  
Address: 124 W AMERICA ST #16  
City-St-Zip: ORLANDO, FL 32801

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: MOANA HALL

PD

05/02/2006

Electronic Signature of Signing Officer or Director

Date