


FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90081 041 ****61.25

2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 753371			
1. Entity Name LAKE OLYMPIC TOWNHOUSES HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business C/O WORLD OF HOMES 820 PALM WAY STREET KISSIMMEE, FL 34744 US		Mailing Address C/O WORLD OF HOMES 820 PALM WAY STREET KISSIMMEE, FL 34744 US	
2. Principal Place of Business C/O WORLD OF HOMES 2884 S. OSCEOLA AVE. Orlando, FL 32806 USA		3. Mailing Address C/O WORLD OF HOMES 2884 S. OSCEOLA AVE. Orlando, FL 32806 USA	
4. FEI Number 59-2500128		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DIAZ, VICKI 2884 S OSCEOLA AVE ORLANDO, FL 32806		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 <i>Vicki Diaz</i> DATE <i>1-20-06</i> (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD VARNADUE, REBA 658 OLYMPIC DRIVE OCOE, FL 34761 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Varnadue, Reba 658 Olympic Drive Ocoee FL 34761 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD EDROSA, LORELEI 647 OLYMPIC DRIVE OCOE, FL 34761 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Weston, Susan 768 OLYMPIC Circle Ocoee FL 34761 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD OVINNIO, GINA 771 OLYMPIC CIRCLE OCOE, FL 34761 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ovinnio, Gina 771 Olympic Circle Ocoee FL 34761 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D APPLEBUUM, DRANE 650 OLYMPIC DRIVE OCOE, FL 34761 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Applebaum, Drane 650 Olympic Drive Ocoee FL 34761 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STAYER, LINDA 642 OLYMPIC DRIVE OCOE, FL 34761 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD stayer, Linda 642 Olympic Drive Ocoee FL 34761 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 *Linda E. Stayer* LINDA E. STAYER
January 30, 2006

407.532-5714