

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 06, 1999 8:00 am
Secretary of State

03-06-1999 90113 006 ****61.25

0073272

NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 757180

1. Corporation Name

LAKE VILLAS Q AND R HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

4 LAKE VILLA WAY
 KISSIMMEE FL 34743-4531

4 LAKE VILLA WAY
 KISSIMMEE FL 34743-4531



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

05/06/1981

22 City & State

27 City & State

4. FEI Number
 59-2187626

Applied For
 Not Applicable

23 Zip Country

28 Zip Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

24 25

29 30

6. Election Campaign Financing
 Trust Fund Contribution

\$5.00 May Be
 Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUMPH, JOHN
 41 LAKE VILLA WAY
 KISSIMMEE FL 34743

81 Name **LEE GUADAGNO**

82 Street Address (P.O. Box Number is Not Acceptable)
38 LAKE VILLA WAY

83

84 City **Kissimmee** FL 85 Zip Code **34743**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Lee Guadagno President

2/24/99

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** DELETE
 NAME **RUMPH, JOHN**
 STREET ADDRESS **41 LAKE VILLA WAY**
 CITY-ST-ZIP **KISSIMMEE FL**

1.1 TITLE Change Addition
 1.2 NAME **PAUL FARRAR**
 1.3 STREET ADDRESS **47 LAKE VILLA WAY**
 1.4 CITY-ST-ZIP **KISSIMMEE, FL 34743**

TITLE **D** DELETE
 NAME **GUADAGNO, LEE**
 STREET ADDRESS **38 LAKE VILLA WAY**
 CITY-ST-ZIP **KISSIMMEE FL 34743**

2.1 TITLE **P** Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE **S** DELETE
 NAME **DEFAZIO, DONNA**
 STREET ADDRESS **90 LAKE VILLA WAY**
 CITY-ST-ZIP **KISSIMMEE FL**

3.1 TITLE **D** Change Addition
 3.2 NAME **William Froelich**
 3.3 STREET ADDRESS **120 LAKE VILLA WAY**
 3.4 CITY-ST-ZIP **KISSIMMEE, FL 34743**

TITLE **D** DELETE
 NAME **JOHNSON, KAY**
 STREET ADDRESS **75 LAKE VILLA WAY**
 CITY-ST-ZIP **KISSIMMEE FL 34743**

4.1 TITLE **T** Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE **D** DELETE
 NAME **HURLEY, LOUIS**
 STREET ADDRESS **79 LAKE VILLA WAY**
 CITY-ST-ZIP **KISSIMMEE FL**

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE **D** DELETE
 NAME **TESTA, SAL**
 STREET ADDRESS **28 LAKE VILLA WAY**
 CITY-ST-ZIP **KISSIMMEE FL**

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lee Guadagno*

2/26/99

407-348-5318

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)