2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#757180

FILED Jun 14, 2005 Secretary of State

Entity Name: LAKE VILLAS Q AND R HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4 LAKE VILLA WAY 2180 WEST SR 434

KISSIMMEE, FL 347434531 SUITE 5000

LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

4 LAKE VILLA WAY 2180 WEST SR 434

KISSIMMEE, FL 347434531 SUITE 5000

LONGWOOD, FL 32779 US

FEI Number: 59-2187626 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: Name and Address of New Registered Agent:

O'BRIEN, PATRICK HART, JAMES W JR 54 LAKE VILLA WAY SENTRY MANAGEMENT INC

KISSIMMEE, FL 32743 US 2180 WEST 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 06/14/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDIT

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VT ()Delete Title: SD (X)Change ()Addition

 Name:
 GUADAGNO, LEE
 Name:
 GUADAGNO, LEE

 Address:
 38 LAKE VILLA WAY
 Address:
 38 LAKE VILLA WAY

 City-St-Zip:
 KISSIMMEE, FL 34743
 City-St-Zip:
 KISSIMMEE, FL 34743

Title: PD () Delete Title: () Change () Addition

 Name:
 O'BRIEN, PATRICK
 Name:

 Address:
 54 LAKE VILLA WAY
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34743
 City-St-Zip:

 $\label{eq:title:Title:SD} \textit{Title:} \qquad \textit{SD} \qquad \textit{()} \; \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{VTD} \qquad \textit{(X)} \; \textit{Change ()} \; \textit{Addition}$

 Name:
 ROSADO, RONALD
 Name:
 ROSADO, RONALD

 Address:
 109 LAKE VILLA WAY
 Address:
 109 LAKE VILLA WAY

 City-St-Zip:
 KISSIMMEE, FL 34743
 City-St-Zip:
 KISSIMMEE, FL 34743

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICK O'BRIEN PD 06/14/2005