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NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 757284

1. Corporation Name

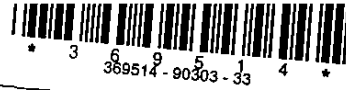
LAKE VIEW PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

2180 PARK AVE. NORTH
STE 326
WINTER PARK FL 32789

Mailing Address

2180 PARK AVE. NORTH
STE 326
WINTER PARK FL 32789



369514-90303-33



2. Principal Place of Business

2a. Mailing Address

3. Date incorporated or Qualified

07/15/1981

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-2147851

Applied For

Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

MALCOM, THOMAS D.
2180 PARK AVE. NORTH
SUITE 326
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BRACKIN, ANDREA
STREET ADDRESS 1110 DOUGLAS AVENUE
CITY-ST-ZIP ALTAMONTE SPRINGS FL
 DELETE

TITLE VD
NAME BRAZNEILL, SUZANNE
STREET ADDRESS 1110 DOUGLAS AVE STE 300
CITY-ST-ZIP ALTAMONTE SPRINGS FL
 DELETE

TITLE SD
NAME BOURDEAU, PENNY
STREET ADDRESS 1110 DOUGLAS AVE STE 300
CITY-ST-ZIP ALTAMONTE SPRINGS FL
 DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME Friedman, George
1.3 STREET ADDRESS 1110 Douglas Avenue
1.4 CITY-ST-ZIP Altamonte Springs, FL 32714
 Change Addition

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

3.1 TITLE STD
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
 Change Addition

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

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

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

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: *Suzanne Brazneill*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/99 407-682-7266
Date Daytime Phone #

CR2E037-(11/98)

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