

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757693

FILED  
Jan 12, 2011  
Secretary of State

**Entity Name:** LAKE HOWELL ARMS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

700 GEORGETOWN DR  
CASSELBERRY, FL 32707 US

**New Principal Place of Business:**

**Current Mailing Address:**

700 GEORGETOWN DR  
CASSELBERRY, FL 32707 US

**New Mailing Address:**

FEI Number: 59-2166337

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GROSS, MATTHEW R J.D.  
178 LAGO VISTA BLVD  
CASSELBERRY, FL 32707 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BARBER, FRANK  
Address: 232 WILSHIRE BLVD  
City-St-Zip: CASSELBERRY, FL 32707

Title: VP  
Name: TRAVIS, JIM  
Address: 180 LARGO VISTA BLVD  
City-St-Zip: CASSELBERRY, FL 32707

Title: SEC  
Name: HEBERT, ADA  
Address: 2019 SEPLER CT  
City-St-Zip: FERN PARK, FL 32730

Title: TRES  
Name: BEASLEY, LARRY  
Address: 912 ARABIAN  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D  
Name: MUSSER, JENIFER  
Address: 5415 LAKE HOWELL RD #327  
City-St-Zip: WINTER PARK, FL 32792

Title: D  
Name: HUFF, MARY  
Address: 2045 KNOTTINGHAM DR  
City-St-Zip: WINTER PARK, FL 32792

I hereby 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 all other like empowered.

SIGNATURE: FRANK PAUL BARBER

PRES

01/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date