

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90082 001 ****61.25

DOCUMENT # 762602

1. Entity Name

LAKE DOT VILLAS ASSOCIATION, INC.



Principal Place of Business

PO BOX 120809
CLERMONT FL 34712

Mailing Address

PO BOX 120809
CLERMONT FL 34712



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2190282

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PAHALY, BRUCE H.
948 FIFTH STREET
CLERMONT FL 34711

7. Name and Address of New Registered Agent

Name

TIRRI, RUTH

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

920 FIFTH ST.

City

CLERMONT

FL

Zip Code

34711

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

[Signature]

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

RUTH A. TIRRI, SECRETARY

(NOTE: Registered Agent signature required when reinstating)

04/06/06

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	S	<input type="checkbox"/> Delete
NAME	TIRRI, RUTH	
STREET ADDRESS	920 FIFTH ST	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PADRO, SANTIAGO	
STREET ADDRESS	988 FIFTH STREET	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	PAMALAY, BRUCE H.	
STREET ADDRESS	964 FIFTH STREET	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	KING, ANTONIA	
STREET ADDRESS	956 FIFTH ST.	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SHAUGHNESSY, JANE	
STREET ADDRESS	936 FIFTH STREET	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZADORA, JUANITA	
STREET ADDRESS	972 FIFTH ST.	
CITY-ST-ZIP	CLERMONT FL 34711	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PADRO, SANTIAGO	
STREET ADDRESS	988 FIFTH ST.	
CITY-ST-ZIP	CLERMONT, FL 34711	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DASHER, BRENDA	
STREET ADDRESS	900 FIFTH ST	
CITY-ST-ZIP	CLERMONT, FL 34711	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HAASE, NANCY A.	
STREET ADDRESS	984 FIFTH ST.	
CITY-ST-ZIP	CLERMONT, FL 34711	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CRAWFORD, WM.C.	
STREET ADDRESS	932 FIFTH ST.	
CITY-ST-ZIP	CLERMONT, FL 34711	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

[Signature] SANTIAGO PADRO

4/3/06

407-832-7401

ATTACHMENT

40053000

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DOCUMENT # 762602

LAKE DOT VILLAS ASSOCIATION, INC.
P.O.BOX 120809
CLERMONT, FL. 34712

BLOCK 11 - ADDITIONS

Title	D
Name	Pitt, Terry
Street address	944 Fifth St.
City-St-Zip	Clermont, Fl. 34711

Title	D
Name	Rifle, J. Todd
Street address	992 Fifth St.
City-St-Zip	Clermont, Fl. 34711