2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006
Secretary of State

DOCUMENT# 763299

Entity Name: THREE LAKES VILLAGE CONDOMINIUM ASSOCIATION,INC.

Current Principal Place of Business:

882 JACKSON AVE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

882 JACKSON AVE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-2202952 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPECIALTY MANAGEMENT
882 JACKSON AVE
WINTER PARK, FL 32789 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:	VD	( ) Delete
Name:	FENCIK, HERMINE	
Address:	4876 LAKE RIDGE RD	
City-St-Zip:	ORLANDO, FL 32808	
Title:	PD	( ) Delete
Name:	SANFORD, ED	
Address:	4532 LIGHTHOUSE CIR.	
City-St-Zip:	ORLANDO, FL 32808	
Title:	SD	( ) Delete
Name:	HICKEY, PATRICIA	
Address:	4880 LAKE RIDGE RD	
City-St-Zip:	ORLANDO, FL 32808	
Title:	TD	(X) Delete
Name:	BEDLEY, TAMMIE	
Address:	4500 LIGHTHOUSE CIR	
City-St-Zip:	ORLANDO, FL 32808	
Title:	D	( ) Delete
Name:	FLOYD, CARL	
Address:	4823 LIGHTHOUSE CIR	
City-St-Zip:	ORLANDO, FL 32808	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ED SANFORD PD 03/16/2006

Electronic Signature of Signing Officer or Director — Date