

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765163

FILED
Jan 19, 2004
Secretary of State

Entity Name: LAKE PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 10133
LARGO, FL 33773 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 10133
LARGO, FL 33773 US

New Mailing Address:

FEI Number: 59-2349311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, DONNA
9460 N 106 AVE
SEMINOLE, FL 33777 US

Name and Address of New Registered Agent:

MESSA, MARIA
10266 95 ST N.
SEMINOLE, FL 33777 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: MARIA MESSA

01/19/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: TORRES, DONNA
Address: 9460 N 106 AVE
City-St-Zip: LARGO, FL 33777

Title: S () Delete
Name: PILLIS, TRUDY
Address: 10893 97TH ST N
City-St-Zip: LARGO, FL 33773

Title: PD () Delete
Name: GREEN, LORRAINE
Address: 9467 106TH AVENUE NORTH
City-St-Zip: LARGO, FL 33777

Title: VD (X) Delete
Name: MESSA, ZACHARY
Address: 10266 N 95 ST
City-St-Zip: SEMINOLE, FL 33777

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: MESSA, MARIA
Address: 10266 95 ST N.
City-St-Zip: LARGO, FL 33777

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

Title: P (X) Change () Addition
Name: MESSA, ZACHARY
Address: 10266 95 ST. N.
City-St-Zip: LARGO, FL 33777

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 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: ZACHARY MESSA

P

01/19/2004

Electronic Signature of Signing Officer or Director

Date