

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 14, 2006 08:00 AM
Secretary of State

DOCUMENT # 767757

1. Entity Name
LAKE WEIR HARBOR ESTATES ASSOCIATION, INC.



Principal Place of Business

**DENNIS SLATER
15111 SE 103RD TERR.
SUMMERFIELD, FL 34491 US**

Mailing Address

**GRETCHEN L. BERGE
15090 SE 104TH COURT
SUMMERFIELD, FL 34491 US**



06112006 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2965490

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BERGE, GRETCHEN L
15090 SE 104TH CT.
SUMMERFIELD, FL 34491**

**DO NOT WRITE
IN THIS SPACE**

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 *Gretchen L. Berge*

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

(NOTE: Registered Agent signature required when reappointing)

6-10-06

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U00000567199
06/14/06-80002-009 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
BERGE, GRETCHEN L
15090 SE 104 TH CT
SUMMERFIELD, FL 34491**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
TODD, GRACE
15110 SE 103RD AVE
SUMMERFIELD, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SLATER, DENNIS
15191 SE 103RD TERR.
SUMMERFIELD, FL 34491**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
HALL, CAROL
15030 SE 103RD TERR
SUMMERFIELD, FL 34491**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
STANDHART, JOHN
15071 SE 104TH COURT
SUMMERFIELD, FL 34491**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DAVIS, SALLY
15210 SE 103RD TERR.
SUMMERFIELD, FL 34491**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Gretchen L. Berge*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-10-06

Date

352-298-3432

Daytime Phone #