

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 770346 (5)

1. Corporation Name

THE LAKES OF SARASOTA MAINTENANCE ASSOCIATION, INC.



Principal Place of Business

Mailing Address

630 S ORANGE AVE
STE 102
SARASOTA FL 34236
US

630 S. ORANGE AVE.
STE #102
SARASOTA FL 34236
US

3. Date Incorporated or Qualified
09/21/1983

3a. Date of Last Report
02/27/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

4. FEI Number

59-2502633

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONDO KEEPERS
630 S. ORANGE AVE.
SUITE 102
SARASOTA FL 34236

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME TOWNER, MARGARET
STREET ADDRESS 4580 TRAILS DR
CITY - ST - ZIP SARASOTA FL ☐ DELETE

TITLE VD
NAME LINDBERG, WILLIAM
STREET ADDRESS 4731 E TRAILS DR
CITY - ST - ZIP SARASOTA FL ☒ DELETE

TITLE D
NAME O'DONNELL, ED
STREET ADDRESS 4382 OAK VIEW DR
CITY - ST - ZIP SARASOTA FL ☒ DELETE

TITLE STD
NAME MARTIN, ART
STREET ADDRESS 4360 TRAILS DR
CITY - ST - ZIP SARASOTA FL ☐ DELETE

TITLE D
NAME HOBACK, JOHN
STREET ADDRESS 1724 OAK LAKES DR
CITY - ST - ZIP SARASOTA FL ☒ DELETE

TITLE D
NAME GREEN, RON
STREET ADDRESS 1732 OAK LAKES DR
CITY - ST - ZIP SARASOTA FL ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

ELLEN Smith D ☒ Change ☒ Addition
4388 Trails Dr.

Sarasota FL 34232

LEONORE Lebhar D ☒ Change ☒ Addition
4416 Oak View Dr.

Sarasota, FL. 34932

DAVID Bobish D ☒ Change ☒ Addition
1599 SWANEE Ct.

Sarasota FL. 34232

DAVID Yarlett D ☒ Change ☒ Addition
4495 Trails Dr.

Sarasota FL. 34232

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)