2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770346

FILED Feb 22, 2005 Secretary of State

Entity Name: THE LAKES OF SARASOTA MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
2180 W SR STE 5000						
LONGWO	DD, FL 32779	5044 US				
Current Mailing Address:			New Maili	New Mailing Address:		
2180 WES SUITE 500 LONGWO		5044 US				
FEI Number: 59-2502633 FEI Number Applied For () FEI Number		FEI Number Not Appl	icable () Certificate of Status Desired ()			
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
HART, JAMES W JR 2180 W SR 434 STE 5000 LONGWOOD, FL 32779 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,						
in the State		domino uno statement for the p	arpose or origing r	to registered effice of registered agent, or bear,		
SIGNATUR	RE:					
	Electron	ic Signature of Registered Age	nt	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () PENNEY, RICH 1752 OAK LAKE SARASOTA, FL	ES DR	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VPD () CONNER, JOHN 4563 TRAILS D SARASOTA, FL	R	Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition CONNER, JOHN 1843 COTTONWOOD TRL SARASOTA, FL 34232		
Title: Name: Address: City-St-Zip:	SD () ZACCAGNINO, PO BOX 51472 SARASOTA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	TD () GORSKI, NANC 4464 TRAILS D SARASOTA, FL	R	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () NICCOLAIE, BII 1741 OAK LAKE SARASOTA, FL	ES DR	Title: Name: Address: City-St-Zip:	D (X) Change () Addition KOHR, BOB 4367 TRAILS DR SARASOTA, FL 34232		
Title: Name: Address: City-St-Zip:	D () HARRIMAN, THI 1510 OAK WAY SARASOTA, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition		

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: RICHARD PENNEY PD 02/22/2005