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Apr 27 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 770407 (5)

1. Corporation Name

THE LAKES OF SARASOTA HOMEOWNERS' ASSOCIATION, I  
NC.

Principal Place of Business

Mailing Address

630 S. ORANGE AVE.  
SUITE 102  
SARASOTA FL 34236

630 S. ORANGE AVE.  
SUITE 102  
SARASOTA FL 34236



3. Date Incorporated or Qualified

09/23/1983

4. FEI Number

59-2502637

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME SMITH, ELLEN  
STREET ADDRESS 4388 TRIALS DR  
CITY-ST-ZIP SARASOTA FL

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME D. BARBARA WALTERS  
1.3 STREET ADDRESS 4382 TRIALS DR.  
1.4 CITY-ST-ZIP SARASOTA, FL 34232

TITLE VD ☐ DELETE

NAME MARTIN, ARTHUR  
STREET ADDRESS 4360 TRIALS DR.  
CITY-ST-ZIP SARASOTA FL

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME MARY ANN HANSEN  
2.3 STREET ADDRESS 4367 TRIALS DR.  
2.4 CITY-ST-ZIP SARASOTA, FL 34232

TITLE SD ☐ DELETE

NAME MASTERSON, JOAN  
STREET ADDRESS 4372 TRIALS DRIVE  
CITY-ST-ZIP SARASOTA FL

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME YVETTE MCPHERSON  
3.3 STREET ADDRESS 1283 COTTON WOOD TRAIL  
3.4 CITY-ST-ZIP SARASOTA, FL 34232

TITLE D ☒ DELETE

NAME ROBERTSON, CAROL  
STREET ADDRESS 4382 TRIALS DR  
CITY-ST-ZIP SARASOTA FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D ☒ DELETE

NAME PLACK, EARL  
STREET ADDRESS 4363 TRIALS DRIVE  
CITY-ST-ZIP SARASOTA FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Arthur Plack* REQUIRED

4/14/98 94 357-4402

CR2E037 (10/97)