

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

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DOCUMENT # **G94344** (0)

1. Corporation Name

**L.V. HOME OWNERS ASSOC. INC.**



Principal Place of Business

**274 LAMPLIGHTER DR  
MELBOURNE FL 32934**

Mailing Address

**274 LAMPLIGHTER DR  
MELBOURNE FL 32934**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**03/21/1984**

3a. Date of Last Report

**03/30/1995**

4. FEI Number

**59-2505033**

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

10. Name and Address of New Registered Agent

**NICOLUCCI, LOU  
437 WINDOVER CT  
MELBOURNE FL 32934**

81 Name

**EITNER, LORRAINE**

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

**387 Lamplighter Dr.**

83

84 City

**MELBOURNE**

FL

85 Zip Code

**32934**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: **LORRAINE EITNER**

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

*Lorraine Eitner*

**1 April 96**

DATE

12. OFFICERS AND DIRECTORS

TITLE **CD** ☒ DELETE

NAME **NICOLUCCI, LOU**  
STREET ADDRESS **437 WINDOVER COURT**  
CITY-STATE-ZIP **MELBOURNE FL**

TITLE **P** ☐ DELETE

NAME **DOROTHY BAKER**  
STREET ADDRESS **165 WESTHAVEN CT.**  
CITY-STATE-ZIP **MELBOURNE FL**

TITLE **VP** ☒ DELETE

NAME **SANDRA HARTLEY**  
STREET ADDRESS **288 WASTVIEW CT**  
CITY-STATE-ZIP **MELBOURNE FL**

TITLE **T** ☒ DELETE

NAME **GORDON, LORRAINE**  
STREET ADDRESS **89 LAMPLIGHTER DRIVE**  
CITY-STATE-ZIP **MELBOURNE FL**

TITLE **S** ☐ DELETE

NAME **MAXWELL, DONNA**  
STREET ADDRESS **274 LAMPLIGHTER DR**  
CITY-STATE-ZIP **MELBOURNE FL**

TITLE **D** ☒ DELETE

NAME **EITNER, LORRAINE**  
STREET ADDRESS **387 LAMPLIGHTER DR.**  
CITY-STATE-ZIP **MELBOURNE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Chairman, Bd. Directors** ☒ Change ☐ Addition

1.2 NAME **Eitner, Lorraine**  
1.3 STREET ADDRESS **387 Lamplighter Dr.**  
1.4 CITY-STATE-ZIP **Melbourne, Fl. 32934**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE **Vice-President** ☒ Change ☐ Addition

3.2 NAME **Dorothy Kohan**  
3.3 STREET ADDRESS **266 Westview Ct.**  
3.4 CITY-STATE-ZIP **Melbourne, Fl. 32934**

4.1 TITLE **Treasurer** ☒ Change ☐ Addition

4.2 NAME **John Martin**  
4.3 STREET ADDRESS **228 Wellesley Ct.**  
4.4 CITY-STATE-ZIP **Melbourne, Fl. 32934**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE **Director** ☒ Change ☐ Addition

6.2 NAME **Conrad Bisson**  
6.3 STREET ADDRESS **4 Westfield Ct.**  
6.4 CITY-STATE-ZIP **Melbourne, Fl. 32934**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under Section 130.704, 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Lorraine Eitner, Chairman, Bd. of Directors**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE OF PREPARATION

407-259-1030

CR2E034 (12/95)

L.V. HOME OWNERS ASSOC INC

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L.V. Homeowners Assoc., Inc.  
Lamplighter Village I  
274 Lamplighter Dr.  
Melbourne, Fl. 32934

CONTINUATION: ANNUAL REPORT 1996 #G94344  
FEI #59-2505033

Item #12:

Title:	Name	Street Address	City
D	Dorothy Carter	102 Lamplighter Dr.	Melbourne
D	Pat Daly	104 Lamplighter Dr.	Melbourne
D	Martha Levy	76 Westview Ct.	Melbourne
D	John Lyons	222 Wellesley Ct.	Melbourne
D	Harold Maxwell	274 Lamplighter Dr.	Melbourne