

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002363

FILED
Apr 20, 2006
Secretary of State

Entity Name: LAKE FOREST TRAILS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3348 EDGEWATER DR
ORLANDO, FL 32804

New Principal Place of Business:

5522 NW 43 STREET
SUITE B
GAINESVILLE, FL 32653

Current Mailing Address:

3348 EDGEWATER DR
ORLANDO, FL 32804

New Mailing Address:

5522 NW 43 STREET
SUITE B
GAINESVILLE, FL 32653

FEI Number: 90-0049164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEYMOUR, JAMES D JR
3348 EDGEWATER DR
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

LINDSEY, GLENDA
C/O BOSSHARDT PROPERTY MGT INC
5522-B NW 43 STREET
GAINESVILLE, FL 32653 US

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.

SIGNATURE: GLENDA LINDSEY

04/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SEYMOUR, JAMES D JR
Address: 3348 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: DV () Delete
Name: SCHULER, C LAWRENCE
Address: 3348 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: DST () Delete
Name: BOELTER, MADELYN
Address: 3348 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: P () Delete
Name: MCCLENDON, MIMI
Address: P.O. BOX 1114
City-St-Zip: GAINESVILLE, FL 32602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LEE, NATASHA
Address: 437 SE 47 TERRACE
City-St-Zip: GAINESVILLE, FL 32641

Title: DV (X) Change () Addition
Name: DEWESE-MONSANTO, TARALYN
Address: 4649 SE 6 AVENUE
City-St-Zip: GAINESVILLE, FL 32641

Title: DS (X) Change () Addition
Name: BOYD, ERICA
Address: 503 SE 47 TERRACE
City-St-Zip: GAINESVILLE, FL 32641

Title: DT (X) Change () Addition
Name: BRAY, DENISE
Address: 4639 SE 6 AVENUE
City-St-Zip: GAINESVILLE, FL 32641

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: NATASHA LEE

P

04/20/2006

Electronic Signature of Signing Officer or Director

Date