

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005968

FILED
Jan 04, 2006
Secretary of State

Entity Name: LAKE VISTA SPARTANS, INC.

Current Principal Place of Business:

764 62 PLACE SOUTH
ST PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

764 62 PLACE SOUTH
ST PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 59-3673475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARLIN, MYRON T
764 62 PLACE SOUTH
ST PETERSBURG, FL 33705 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARLIN, MYRON T
Address: 764 62 PLACE SOUTH
City-St-Zip: ST PETERSBURG, FL 33705

Title: D () Delete
Name: MORRISON, PAUL
Address: 1404 COMPTON ST
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: BARREN, CLIFFORD
Address: 882 68 AVE SOUTH
City-St-Zip: ST PETERSBURG, FL 33705

Title: D () Delete
Name: WHIPPLE, KAREN
Address: 5608 LYNN LAKE DR SOUTH #C
City-St-Zip: ST PETERSBURG, FL 33712

Title: D () Delete
Name: BLAIR, MICHAEL
Address: 4818 4 STREET SOUTH
City-St-Zip: ST PETERSBURG, FL 33705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MYRON T. MARLIN

D

01/04/2006

Electronic Signature of Signing Officer or Director

Date