

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006684

**FILED
Apr 26, 2004
Secretary of State**

Entity Name: LAKE ARROWHEAD 1A CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

R & P PROPERTY MGT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-3683476 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

R & P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 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: PD () Delete
Name: LOFTUS, BRIAN
Address: 4899 INVERNESS CLUB DR
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: THIRTY ACRE, KEN
Address: 4899 INVERNESS CLUB DR
City-St-Zip: NAPLES, FL 34112

Title: STD () Delete
Name: REINERT, RALPH E
Address: 28341 S TAMiami TR, STE 4
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D (X) Delete
Name: THOMAS, CAROL
Address: 4899 INVERNESS CLUB DR
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JOHNSON, JAMES
Address: 4695 WINGED FOOT CT, #201
City-St-Zip: NAPLES, FL 34112

Title: VPD (X) Change () Addition
Name: WHITMAN, ERIC
Address: 4685 WINGED FOOT CT, #204
City-St-Zip: NAPLES, FL 34112

Title: STD (X) Change () Addition
Name: WARTCHOW, CHRISTIAN
Address: 4680 HAMPSHIRE CT, #102
City-St-Zip: NAPLES, FL 34112

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 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: JAMES JOHNSON

PD

04/26/2004

Electronic Signature of Signing Officer or Director

_____ Date