2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other-like empowered.

SIGNATURE:

Jan 31, 2005 8:00 am **Secretary of State** DOCUMENT # N00140 1. Entity Name 01-31-2005 90058 039 ****61.25 LAKE DORA HARBOUR HOMEOWNERS ASSOCIATION, INCORPORATED Principal Place of Business Mailing Address 3540 HARBOR DR 130 LAKEVIEW LANE MOUNT DORA FL 32757 MOUNT DORA FL 32757 2. Principal Place of Business 3. Mailing Address 3540 HARBOUR Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 59-2414572 Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired LARKE ろみフジ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RIZZO, LORETTA Street Address (P.O. Box Number is Not Acceptable) 3540 HAR BOUR DR. **MOUNT DORA FL 32757** Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) in exception that Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 11. TITLE ☐ Delete TITLE P 2 25 CRANE, FRANK LARRY NAME NAME LAKESHORE PL. 131 LAKEVIEW LANE STREET ADDRESS STREET ADDRESS 3/31 MOUNT DORA FL 32757 CITY-ST-ZIP CITY-ST-ZIP 3275° TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition RIZZO, LORETTA NAME NAME 3540 HARBOUR DR. - -STREET ADDRESS STREET ADDRESS MOUNT DORA FL 32757 CITY-ST-7IP CITY-ST-ZIP TITL F ☐ Delete TITLE Change Addition RUSSELL, JAMES NAME NAME 3559 HARBOUR DRIVE STREET ADDRESS STREET ADDRESS MOUNT DORA FL 32757 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete 2 effange ☐ Addition VINTILLA KENT, JAY NAME NAME 3436 HARBOUR DK 110 LAKEVIEW LANE STREET ADDRESS STREET ADDRESS MOUNT DORA FL 32757 CITY-ST-7IP CITY-ST-7IP 32757 TITLE ☐ Delete THE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 report or supplemental 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 truestee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED

ORECTA RIZZU 1/25/04 350-735-3050