

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90056 024 ****61.25

DOCUMENT # N00809

1. Entity Name
EAGLE LAKE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994**

Mailing Address
**1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994**

40040000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01092007

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-2382312

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ADVANTAGE PROPERTY MGMT
1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994**

Name

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

City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME DEPALMA, EDWARD
STREET ADDRESS 3031 SW WESTLAKE CIR.
CITY-ST-ZIP PALM CITY, FL 34990

TITLE SD ☒ Delete
NAME LITSEY, CONSTANCE
STREET ADDRESS 2779 SW WESTLAKE CIRCLE
CITY-ST-ZIP PALM CITY, FL 34990

TITLE TD ☐ Delete
NAME CRISANTI, JOHN
STREET ADDRESS 2738 SW WESTLAKE CIRCLE
CITY-ST-ZIP PALM CITY, FL 34990

TITLE VPD ☐ Delete
NAME MOHE, DICK
STREET ADDRESS 3032 SW WESTLAKE CIR.
CITY-ST-ZIP PALM CITY, FL 34990

TITLE D ☐ Delete
NAME MOONEY, KEVIN
STREET ADDRESS 2816 SW WESTLAKE CIR.
CITY-ST-ZIP PALM CITY, FL 34990

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **JD JORDAN, GEORGE**
STREET ADDRESS **2637 SW WESTLAKE CIRCLE**
CITY-ST-ZIP **PALM CITY, FL 34990**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/27/07