

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006001

FILED
Apr 06, 2006
Secretary of State

Entity Name: LUKAS ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

LUKAS ESTATES
ORLANDO, FL 32820

New Principal Place of Business:

Current Mailing Address:

PO BOX 622974
OVIEDO, FL 32762

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUERRA, NICHOLAS C
3332 LUKAS COVE
ORLANDO, FL 32820 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: GUERRA, NICHOLAS C
Address: 3332 LUKAS COVE
City-St-Zip: ORLANDO, FL 32820

Title: D () Delete
Name: FINNERTY, ELLEN
Address: 3308 LUKAS COVE
City-St-Zip: ORLANDO, FL 32820

Title: D (X) Delete
Name: GRIGAS, DINA
Address: 17314 JOHNNATHAN LUKAS COURT
City-St-Zip: ORLANDO, FL 32820

Title: D () Delete
Name: PORTA, PETE
Address: 3338 LUKAS COVE
City-St-Zip: ORLANDO, FL 32820

Title: D () Delete
Name: OHARA, TOM
Address: 3362 LUKAS COVE
City-St-Zip: ORLANDO, FL 32820

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: THOMAS S. O'HARA

D

04/06/2006

Electronic Signature of Signing Officer or Director

Date