

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02114

FILED
Apr 08, 2005
Secretary of State

Entity Name: THE LAKE LOTUS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

882 JACKSON AVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

282 WILSHIRE BLVD
STE 282
CASSELBERRY, FL 32707 US

Current Mailing Address:

C/O FLARENT, INC
274 WILSHIRE BLVD STE 282
CASSELBERRY, FL 32707

New Mailing Address:

C/O FLARENT, INC
274 WILSHIRE BLVD STE 282
CASSELBERRY, FL 32707 US

FEI Number: 59-2411703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, JEFF
274 WILSHIRE BLVD.
SUITE 282
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

HALL, GEOFFREY W
274 WILSHIRE BLVD.
SUITE 282
CASSELBERRY, FL 32707 US

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: GEOFFREY W. HALL

04/08/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: FOSTER, ANTHONY
Address: 1060 LOTUS PARKWAY #1014
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: PD () Delete
Name: MARRERO, FELIX
Address: 1036 BONAIRE DRIVE #2846
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: SD () Delete
Name: METEVIER, PHYLLIS
Address: 1054 LOTUS COVE #612
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VD () Delete
Name: OWENS, NADINE
Address: 1036 BONAIRE DRIVE #2842
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TD () Delete
Name: DEFILLIPO, MICHAEL
Address: 1068 LOTUS COVE CT, #811
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: SCHLESKE, RALPH
Address: 1064 LOTUS PARKWAY #943
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: PD (X) Change () Addition
Name: METEVIER, PHYLLIS
Address: 1054 LOTUS COVE #612
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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 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: PHYLLIS METEVIER

PD

04/08/2005

Electronic Signature of Signing Officer or Director

Date