

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000077

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** EAST PARK - NEIGHBORHOOD 5 HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

5955 T.G. LEE BLVD  
SUITE 300  
ORLANDO, FL 32822 US

**New Principal Place of Business:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 328093200 US

**Current Mailing Address:**

5955 T.G. LEE BLVD  
SUITE 300  
ORLANDO, FL 32822 US

**New Mailing Address:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 328093200 US

**FEI Number:** 03-0453670

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FURLOW, REBECCA  
5955 T.G. LEE BLVD.  
SUITE 300  
ORLANDO, FL 32822 US

**Name and Address of New Registered Agent:**

LELAND MANAGEMENT, INC  
6972 LAKE GLORIA BLVD  
ORLANDO, FL 328093200 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: REBECCA FURLOW

04/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LIPPERT, JASON  
Address: 9692 MOSS ROSE WAY  
City-St-Zip: ORLANDO, FL 32832 US

Title: V ( ) Delete  
Name: BACHWANI, JAY  
Address: 9743 LAKE DISTRICT LANE  
City-St-Zip: ORLANDO, FL 32832 US

Title: ST ( ) Delete  
Name: BACHELOR, ANGELA  
Address: 9800 LAKE DISTRICT LANE  
City-St-Zip: ORLANDO, FL 32832 US

Title: VARB ( ) Delete  
Name: VON BLON, GRACEILA  
Address: 9755 LAKE DISTRICT LANE  
City-St-Zip: ORLANDO, FL 32832 US

Title: VSAF ( ) Delete  
Name: INSERRA, JENN  
Address: 10495 KRISTEN PARK DR  
City-St-Zip: ORLANDO, FL 32832 US

**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 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: JASON LIPPERT

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date