

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

1/12

FILED
Feb 02, 2004 8:00 am
Secretary of State

01-12-2004 90018 038 ****61.25

DOCUMENT # N03000001422					
1. Entity Name LAKE GERTRUDE PROPERTY OWNERS' ASSOCIATION, INC.					
Principal Place of Business 308 E 5 AVE MT DORA, FL 32757			Mailing Address 308 E 5 AVE MT DORA, FL 32757		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		Country	
6. Name and Address of Current Registered Agent POTTER, DEL G 308 E 5 AVE MT DORA, FL 32757				7. Name and Address of New Registered Agent	
Name				Name	
Street Address (P.O. Box Number is Not Acceptable)				Street Address (P.O. Box Number is Not Acceptable)	
City				City	
State				State	
Zip Code				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)					
Signature, typed or printed name of registered agent and title if applicable.					
Filing Fee is \$61.25 Due by May 1, 2004		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 NAME STREET ADDRESS CITY-STATE-ZIP	P Carl C. Andersen 1516 Sylvan Dr. Mt. Dora, FL 32757	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP Del G. Potter P. O. Box 1191 Mt. Dora, FL 32756	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	S Vicki Jo Hall 2309 Overlook Dr. Mt. Dora, FL 32757	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	T Robert H. Herndon 1545 Heim Rd. Mt. Dora, FL 32757	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D Stephen C. Vaughn 1324 Sylvan Dr. Mt. Dora, FL 32757	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition			
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12. I hereby certify that this 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 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: _____		1/08/04 352-383-4186			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			

66400654



01082004 Chg-NP CR2E037 (10/03)

4. FEI Number 57-1155173 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

FL Zip Code

Filing Fee is \$61.25 Due by May 1, 2004

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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