

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90060 049 ****61.25

DOCUMENT # N03000003978



1. Entity Name
FORTUNE LAKES PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business
**C/O WORLD OF HOMES
2884 S OSCEOLA AVE
ORLANDO, FL 32806**

Mailing Address
**C/O WORLD OF HOMES
2884 S OSCEOLA AVE
ORLANDO, FL 32806**



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

01072008

Chg-NP

CR2E037 (12/06)

4. FEI Number
36-4549929

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

**WORLD OF HOMES
2884 S. OSCEOLA AVE.
ORLANDO, FL 32806**

Name

Street Address

City

FL

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, 2008**

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 ☐ Delete
NAME **P**
STREET ADDRESS **GUINTANA, ROSE**
CITY-ST-ZIP **2607 GOLD DUST CIR
KISSIMMEE, FL 34744**

TITLE ☐ Delete
NAME **ST**
STREET ADDRESS **PACHECO, EVELYN**
CITY-ST-ZIP **2623 GOLD DUST CIR.
KISSIMMEE, FL 34744**

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **AMBROSIO, LISA**
CITY-ST-ZIP **2648 GOLD DUST CIRCLE
KISSIMMEE, FL 34744**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **HANNEKEN, TOM**
CITY-ST-ZIP **1115 PROSPERITY AVE.
KISSIMMEE, FL 34744**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **HARTBERGER, VIRGINIA**
CITY-ST-ZIP **2667 GOLD DUST CIRCLE
KISSIMMEE, FL 34744**

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
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Rose Quintana **Rose Quintana** **1/29/08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #