

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000708

FILED
Mar 29, 2005
Secretary of State

Entity Name: LONGWOOD-LAKE MARY CENTER, A CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

230 NORTH PARK AVE
SANFORD, FL

New Principal Place of Business:

1844 LONGWOOD LAKE MARY ROAD
SUITE 1030
LONGWOOD, FL 32750

Current Mailing Address:

230 NORTH PARK AVE
SANFORD, FL

New Mailing Address:

1844 LONGWOOD LAKE MARY ROAD
SUITE 1030
LONGWOOD, FL 32750

FEI Number: 13-4272583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOVER, STPHEN H
230 NORTH PARK AVE
SANFORD, FL 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: PD () Delete
Name: WILCOX, TERRY J
Address: 230 NORTH PARK AVE
City-St-Zip: SANFORD, FL

Title: VD () Delete
Name: KIRTLEY, VICKI M
Address: 230 NORTH PARK AVE
City-St-Zip: SANFORD, FL

Title: ST () Delete
Name: WILCOX, E D
Address: 230 NORTH PARK AVE
City-St-Zip: SANFORD, FL

Title: D () Delete
Name: KIRTLEY, VICKI
Address: 230 NORTH PARK AVE
City-St-Zip: SANFORD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLCOX, TERRY J
Address: 1844 LONGWOOD LAKE MARY RD #1030
City-St-Zip: LONGWOOD, FL 32750

Title: VD (X) Change () Addition
Name: KIRTLEY, VICKI M
Address: 1844 LONGWOOD LAKE MARY RD #1030
City-St-Zip: LONGWOOD, FL 32750

Title: ST (X) Change () Addition
Name: WILLCOX, ELIZABETH D
Address: 1844 LONGWOOD LAKE MARY RD. #1030
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Change () Addition
Name: KIRTLEY, VICKI
Address: 1844 LONGWOOD LAKE MARY RD. #1030
City-St-Zip: LONGWOOD, FL 32750

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: ELIZABETH D. WILLCOX

ST

03/29/2005

Electronic Signature of Signing Officer or Director

Date