

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006039

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** MID-FLORIDA LAKES HOME OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

188 FOREST DR  
LEESBURG, FL 34788

**New Principal Place of Business:**

**Current Mailing Address:**

101 WEST STERLING WAY  
LEESBURG, FL 34788

**New Mailing Address:**

**FEI Number:** 59-1800444

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COLLING, LEE JAY ATTN:  
682 MAITLAND AVENUE  
SUITE 2  
ALTAMONTE SPRINGS, FL 32701 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  
Name: BURGESS, JIM  
Address: 180 SOUTH LAKE DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: VD  
Name: TUCCI, CAROL  
Address: 109 HIGHLAND WAY  
City-St-Zip: LEESBURG, FL 34788

Title: D  
Name: HUTCHINS, RON  
Address: 140 HIBISCUS DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: TD  
Name: BOROFKY, MELVYN  
Address: 101 W. STERLING WAY  
City-St-Zip: LEESBURG, FL 34788

Title: SD  
Name: LORANCE, DAWN  
Address: 101 OAK RIDGE DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: D  
Name: IBY, JUDY  
Address: 160 SOUTH LAKE DRIVE  
City-St-Zip: LEESBURG, FL 34788

I hereby 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 all other like empowered.

SIGNATURE: MELVYN A. BOROFKY

TD

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date