

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010785

FILED  
Jan 09, 2007  
Secretary of State

**Entity Name:** LAKE ANDREW PRESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

15815 SE 105TH TERRACE  
SUMMERFIELD, FL 34491 US

**New Principal Place of Business:**

16850 S. HWY 441  
304  
SUMMERFIELD, FL 34491 US

**Current Mailing Address:**

15815 SE 105TH TERRACE  
SUMMERFIELD, FL 34491 US

**New Mailing Address:**

16850 S. HWY 441  
304  
SUMMERFIELD, FL 34491 US

**FEI Number:** 20-4494538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

IRVIN, SAM L  
15815 SE 105TH TERRACE  
SUMMERFIELD, FL 34491 US

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

IRVIN, SAM L  
16850 S. HWY 441  
304  
SUMMERFIELD, FL 34491 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:

01/09/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DIR ( ) Delete  
Name: IRVIN, SAM L  
Address: 15815 SE 105TH TERRACE  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: DIR ( ) Delete  
Name: IRVIN, BRENDA M  
Address: 15815 SE 105TH TERRACE  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: DIR ( ) Delete  
Name: IRVIN, PAUL M  
Address: 15815 SE 105TH TERRACE  
City-St-Zip: SUMMERFIELD, FL 34491 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DIR (X) Change ( ) Addition  
Name: IRVIN, SAM L  
Address: 16850 S. HWY 441 #304  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: DIR (X) Change ( ) Addition  
Name: IRVIN, BRENDA M  
Address: 16850 S. HWY 441 #304  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: DIR (X) Change ( ) Addition  
Name: IRVIN, PAUL M  
Address: 16850 S. HWY 441 #304  
City-St-Zip: SUMMERFIELD, FL 34491 US

I hereby certify that the information supplied with this filing does not qualify for the 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: SAM L IRVIN

DIR

01/09/2007

Electronic Signature of Signing Officer or Director

Date