

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010798

FILED
Jan 12, 2012
Secretary of State

Entity Name: OVERLOOK AT LAKE LOUISA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5756 S. SEMORAN BLVD
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

5756 S. SEMORAN BLVD
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 20-1936102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOUSE OF MANAGEMENT ENTERPRISES FOR COMMUN
ITY ASSOCIATION, INC.
5756 S. SEMORAN BLVD
ORLANDO, FL 32822 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: D
Name: HAND, SHARON
Address: 5756 S. SEMORAN BOULEVARD
City-St-Zip: ORLANDO, FL 32822

Title: DST
Name: KORATOWSKI, KAREN
Address: 5756 S. SEMORAN BOULEVARD
City-St-Zip: ORLANDO, FL 32822

Title: D
Name: FRICKS, GARY
Address: 5756 S. SEMORAN BOULEVARD
City-St-Zip: ORLANDO, FL 32822

Title: DP
Name: NABOZNY, NICHOLAS
Address: 5756 S. SEMORAN BOULEVARD
City-St-Zip: ORLANDO, FL 32822

Title: D
Name: MCLEMORE, WILLIAM
Address: 5756 S. SEMORAN BOULEVARD
City-St-Zip: ORLANDO, FL 32822

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: NICHOLAS NABOZNY

PRES

01/12/2012

Electronic Signature of Signing Officer or Director

Date