

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004363

FILED  
Jun 02, 2010  
Secretary of State

**Entity Name:** THE LAKES HOMEOWNERS ASSOCIATION NUMBER ONE, INC.

**Current Principal Place of Business:**

4932 SOUTH SHORE DR.  
NEW PORT RICHEY, FL 34652

**New Principal Place of Business:**

882 JACKSON AVENUE  
WINTER PARK, FL 32789

**Current Mailing Address:**

4932 SOUTH SHORE DR.  
NEW PORT RICHEY, FL 34652

**New Mailing Address:**

882 JACKSON AVENUE  
WINTER PARK, FL 32789

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MENKVELD, J A  
4932 SOUTH SHORE DR.  
NEW PORT RICHEY, FL 34652 US

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

JORDAN, BRETT M  
882 JACKSON AVENUE  
WINTER PARK, FL 32789 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: BRETT M. JORDAN

06/02/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LUCKRITZ, TIMOTHY C  
Address: 455 ECHO STREET  
City-St-Zip: LAKE ALFRED, FL 33850

Title: D  
Name: COX, LUJUANE  
Address: 249 JAMES CIRCLE  
City-St-Zip: LAKE ALFRED, FL 33850

Title: D  
Name: CHARLES, BORES JEAN  
Address: 912 JAMES TRAIL  
City-St-Zip: LAKE ALFRED, FL 33850

Title: D  
Name: SPIVEY, IKAY  
Address: 325 JAMES CIRCLE  
City-St-Zip: LAKE ALFRED, FL 33850

Title: D  
Name: HAYES, ROSALEE D  
Address: 345 ECHO STREET  
City-St-Zip: LAKE ALFRED, FL 33850

Title: D  
Name: SMITH, VALERIE  
Address: 236 JAMES CIRCLE  
City-St-Zip: LAKE ALFRED, FL 33850

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: BRETT M. JORDAN

AGEN

06/02/2010

Electronic Signature of Signing Officer or Director

Date