

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009911

FILED
May 03, 2006
Secretary of State

Entity Name: LAKE CANE HILLS COMMUNITY ASSOCIATION INC.

Current Principal Place of Business:

5423 TURKEY LAKE ROAD
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

5316 RIDGEWAY DRIVE
ORLANDO, FL 32819

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
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:

Name and Address of New Registered Agent:

WILSON, LISA
5316 RIDGEWAY DRIVE
ORLANDO, FL 32819 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILSON, LISA
Address: 5316 RIDGEWAY DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: VP () Delete
Name: MORENO, AL
Address: 7119 CANE HILLS CIRCLE
City-St-Zip: ORLANDO, FL 32819

Title: S () Delete
Name: VRIONIDES, PETER
Address: 7012 CANE HILLS CIRCLE
City-St-Zip: ORLANDO, FL 32819

Title: T () Delete
Name: CARBONE, ROBERT
Address: 7000 CANE HILLS CIRCLE
City-St-Zip: ORLANDO, FL 32819

Title: C () Delete
Name: KOPP, JAMES
Address: 7114 CANE HILLS CIRCLE
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SIDES, VERNEL
Address: 5311 RIDGEWAY DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LISA WILSON

P

05/03/2006

Electronic Signature of Signing Officer or Director

Date