2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State
02-27-2006 90104 032 ****61.25

DOCUMENT # N05137

1. Entity Name
THE PROPERTY OWNERS ASSOCIATION OF LAKE PARKER ESTATES, INC.

Principal Place of Business	Mailing Address
1644 PARKER POINTE BLVD. ODESSA, FL 33556 US	C/O COMMUNITY MANAGEMENT SERVICES INC 5609 US 19 SUITE E NEW PORT RICHEY, FL 34652 US

2. Principal Place of Business	3. Mailing Address
5609 US 19	5609 US 19
Suite, Apt. #, etc.: Suite E	Suite, Apt. #, etc.: Suite E
City & State: New Port Richey, FL	City & State: New Port Richey, FL
Zip: 34652 Country: USA	Zip: 34652 Country: USA

01092006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-2927270 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COMMUNITY MGMT 8056 OLD CR 54 NEW PORT RICHEY, FL 34653	Name: Community Management Street Address (P.O. Box Number is Not Acceptable): 5609 US 19 Suite E City: New Port Richey FL Zip Code: 34652

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SPEARS, DOUG 1514 PARKER POINTE BLVD. ODESSA, FL 33556	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD John Porreca 1430 Lake Parker Dr.. Odessa, FL 33556	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MARTIN, RICK 1640 PARKER POINTE BLVD. ODESSA, FL 33556	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Steve Larkin 13632 Dowling Lane Odessa, FL 33556	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PYLE, BOB 1643 PARKER POINT BOULEVARD ODESSA, FL 33556	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Sharon Ross 1529 Lake Parker Dr. Odessa, FL 33556	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RAPAPORT, JEFF 13522 LUNKER COURT ODESSA, FL 33556	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Beverly Benjamin 1334 Fishing Lake Dr. Odessa, FL 33556	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PORRECA, JOHN 1430 LAKE PARKER DR ODESSA, FL 33556	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ken Herd 13610 Dowling Ln. Odessa, FL 33556	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HERRERO, GERARD 1642 PARKER POINTE BLVD. ODESSA, FL 33556	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Gini Sauter 13744 Dowling Ln. Odessa, FL 33556	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 2/22/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #