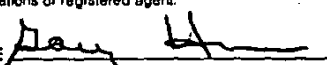
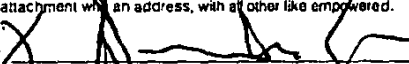


FILED
Jun 04, 2008 8:00 am
Secretary of State

03-31-2008 90007 014 ****61.25

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N06000004793			
1. Entity Name LANCELOT AT WINTER PARK CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 3651 GOLDENROD RD. WINTER PARK, FL 32792		Mailing Address 6955 T G LEE BLVD SUITE 300 ORLANDO, FL 32822	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
5. PREMIER COMMUNITY MANAGERS, INC. 5151 ADANSON ST SUITE 103 ORLANDO, FL 32804 Gary House		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 		DATE 3-7-08	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TO	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RODRIGUEZ, JUANITA 3851 N GOLDENROD RD APT 201 WINTER PARK, FL 32792	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DR DANIEL ZEE 2244 WESTBOURNE DR ORLANDO FL 32765
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T RAMOS, LOURDES 7908 CHEDISTOR CIR ORLANDO, FL 32817	TITLE NAME STREET ADDRESS CITY - ST - ZIP	ADRIANNA TOLAN 12 ARLINGTON ROAD #1 STAMFORD CT 06902
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S IBANEZ, LINDA 1714 ST TROPEZ CT KISSIMMEE, FL 34744	TITLE NAME STREET ADDRESS CITY - ST - ZIP	OTTO ORTIZ 3651 N. GOLDENROD RD A205 WINTER PARK FL 32792
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VELASCO, LILIANA 3651 N GOLDENROD DR APT B106 WINTER PARK, FL 32792	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TNEG, ZHENYU 4214 FENROSE CIR MELBOURNE, FL 32940	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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: 		DATE 5/7/08 407.971.1356	