

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005406

FILED
Mar 19, 2007
Secretary of State

Entity Name: LAKE LOTELA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

905 LAKE LOTELA DRIVE
AVON PARK, FL 33825

New Principal Place of Business:

1282 LAKE LOTELA DRIVE
AVON PARK, FL 33825

Current Mailing Address:

905 LAKE LOTELA DRIVE
AVON PARK, FL 33825

New Mailing Address:

1282 LAKE LOTELA DRIVE
AVON PARK, FL 33825

FEI Number: 65-0538493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUCKORIUS, TED
905 LAKE LOTELA DRIVE
AVON PARK, FL 33825 US

Name and Address of New Registered Agent:

PUCKORIUS, TED
1282 LAKE LOTELA DRIVE
AVON PARK, FL 33825 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:

03/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PUCKORIUS, TED
Address: 905 LAKE LOTELA DRIVE
City-St-Zip: AVON PARK, FL 33825

Title: V () Delete
Name: BARBEN, JOHN
Address: 575 LAKE LOTELA DRIVE
City-St-Zip: AVON PARK, FL 33825

Title: ST () Delete
Name: PALMER, NANCY
Address: 1957 LAKE LOTELA DRIVE
City-St-Zip: AVON PARK, FL 33825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PUCKORIUS, TED
Address: 1282 LAKE LOTELA DRIVE
City-St-Zip: AVON PARK, FL 33825

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

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: TED PUCKORIUS

PRES

03/19/2007

Electronic Signature of Signing Officer or Director

Date