

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002372

FILED  
Mar 08, 2010  
Secretary of State

**Entity Name:** LAKE EOLA HEIGHTS HISTORIC NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

229 EAST AMELIA STREET  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

229 EAST AMELIA STREET  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MARTENS, DAVID  
229 EAST AMELIA STREET  
ORLANDO, FL 32801 US

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

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  
Name: MARTENS, DAVID  
Address: 229 EAST AMELIA STREET  
City-St-Zip: ORLANDO, FL 32801

Title: VP  
Name: MORRIS, MARTHA  
Address: 647 EAST AMELIA STREET  
City-St-Zip: ORLANDO, FL 32803

Title: T  
Name: MARTENS, DIANE  
Address: 229 EAST AMELIA STREET  
City-St-Zip: ORLANDO, FL 32801

Title: S  
Name: COX, RAYMOND  
Address: 600 EAST AMELIA STREET  
City-St-Zip: ORLANDO, FL 32803

Title: BM  
Name: DOWD, JACKIE  
Address: 809 EAST HARWOOD AVE  
City-St-Zip: ORLANDO, FL 32803

Title: BM  
Name: MAGARIAN, GARY  
Address: 808 EAST HARWOOD AVE  
City-St-Zip: ORLANDO, FL 32803

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: DAVID MARTENS

P

03/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date