

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12930

FILED
Apr 30, 2007
Secretary of State

Entity Name: LAKES AT LEESBURG RESIDENTS ASSOCIATION, INC.

Current Principal Place of Business:

107 BUCCANEER DRIVE
LEESBURG, FL 34788

New Principal Place of Business:

Current Mailing Address:

107 BUCCANEER DR
LEESBURG, FL 34788 US

New Mailing Address:

FEI Number: 59-2623495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNOLD, JOYCE M
66 LATTICE DR.
LEESBURG, FL 34788 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: DT () Delete
Name: ARNOLD, JOYCE M
Address: 66 LATTICE DR.
City-St-Zip: LEESBURG, FL 34788

Title: DVP () Delete
Name: BRUNELL, ETTA
Address: 25 SUGARBOAT DR.
City-St-Zip: LEESBURG, FL 34788

Title: DS () Delete
Name: MURCH, DONALD
Address: 67 LATTICE DR
City-St-Zip: LEESBURG, FL 34788

Title: DP () Delete
Name: JENNINGS, NORMAN R
Address: 7 CEDAR KEY WAY
City-St-Zip: LEESBURG, FL 34788

Title: D () Delete
Name: MERRILL, CONRAD
Address: 151 SEA FERN DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ARNOLD, JOYCE M
Address: 66 LATTICE DR.
City-St-Zip: LEESBURG, FL 34788

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

Title: DS (X) Change () Addition
Name: BALDWIN, JANET
Address: 85 LATTICE DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: DT (X) Change () Addition
Name: GREANEY, WILLIAM
Address: 35 BAYBERY DRIVE
City-St-Zip: LEESBURG, FL 34788

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

Title: DVP () Change (X) Addition
Name: KUTOS, ALEX
Address: 138 BUCCANEER DRIVE
City-St-Zip: LEESBURG, FL 34788

I hereby certify that the information supplied with this filing does not qualify 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: JOYCE M ARNOLD

DP

04/30/2007

Electronic Signature of Signing Officer or Director

Date