

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12930

**FILED**  
**Jan 12, 2011**  
**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:**

ANDROLS, SUSIE L  
149 SEA FERN DRIVE  
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: DP  
Name: WOLFE, MARGARET  
Address: 66 BUCCANEER DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: D1VP  
Name: GUZALIAK, HARRY  
Address: 87 BUCCANEER DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: D2VP  
Name: DURHAM, CLYDE A  
Address: 62 BUCCANEER DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: DS  
Name: WATERFALL, ROBIN  
Address: 26 LATTICE  
City-St-Zip: LEESBURG, FL 34788

Title: DT  
Name: ANDROLS, SUSIE L  
Address: 149 SEA FERN DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: DAT  
Name: BELLOFF, JOHN B  
Address: 36 BUCCANEER DRIVE  
City-St-Zip: LEESBURG, FL 34788

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: SUSIE L ANDROLS

DT

01/12/2011

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

\_\_\_\_\_  
Date