

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21025

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** VILLAS OF LAKE ARBOR UNIT 6A CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O SEABOARD ARBORS MANAG SVC INC  
2189 CLEVELAND STREET SUITE 225  
CLEARWATER, FL 33765

**New Principal Place of Business:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779

**Current Mailing Address:**

C/O SEABOARD ARBORS MANAG SVC INC  
2189 CLEVELAND STREET SUITE 225  
CLEARWATER, FL 33765

**New Mailing Address:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779

FEI Number: 59-2987748

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEIGHTON, LENNARD  
C/O SEABOARD ARBORS MGT. SERVICES  
2189 CLEVELAND STREET SUITE 225  
CLEARWATER, FL 33765 US

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

HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 STE 5000  
LONGWOOD, FL 32779 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: JAMES W HART JR

04/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MEYER, BILL  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

Title: VPD  
Name: IJAMS, DICK  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

Title: TSD  
Name: CATALANO, NANCY  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

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: BILL MEYER

PD

04/14/2011

Electronic Signature of Signing Officer or Director

Date