

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22894

FILED  
Jan 23, 2006  
Secretary of State

Entity Name: LAKE PALMER CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

7650 SUMMERTREE LN  
NEW PORT RICHEY, FL 34653 US

**New Principal Place of Business:**

**Current Mailing Address:**

7650 SUMMERTREE LN  
NEW PORT RICHEY, FL 34653 US

**New Mailing Address:**

FEI Number: 37-8098280

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVITT, SHERRI  
7535 BIRDWOOD COURT  
NEW PORT RICHEY, FL 34653 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: V ( ) Delete  
Name: O'NEIL, TIM  
Address: 7636 SUMMERTREE LN  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: ST ( ) Delete  
Name: DONNALLY, MARILYN  
Address: 4650 SUMMERTREE LN  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D ( ) Delete  
Name: LEVITT, MICHAEL  
Address: 7535 BIRDWOOD COURT  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: PD ( ) Delete  
Name: LEVITT, SHERRY  
Address: 7535 BIRDWOOD CT  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D ( ) Delete  
Name: O'NEIL, MYRA  
Address: 7636 SUMMERTREE LN  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D (X) Delete  
Name: LULLHESSY, RITA  
Address: 7541 BIRDWOOD COURT  
City-St-Zip: NEW PORT RICHEY, FL 34653

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: ST (X) Change ( ) Addition  
Name: HART, MARILYN  
Address: 7650 SUMMERTREE LN  
City-St-Zip: NEW PORT RICHEY, FL 34653

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

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

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: MARILYN HART

S/T

01/23/2006

Electronic Signature of Signing Officer or Director

Date