2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26980

FILED Apr 25, 2005 Secretary of State

Entity Name: LAKE JEWELL HILLS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 510 JENNIE JEWEL DR 518 JENNIE JEWEL DR ORLANDO, FL 32806 ORLANDO, FL 32806 US US **Current Mailing Address: New Mailing Address:** 510 JENNIE JEWEL DR 518 JENNIE JEWEL DR ORLANDO, FL 32806 US ORLANDO, FL 32806 US FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HIERHOLZER, EDWARD GOEB, LAURA 518 JENNIE JÉWEL DR 510 JENNIE JEWEL DR ORLANDO, FL 32806 ORLANDO, FL 32806 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: EDWARD HIERHOLZER 04/25/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BISBEE, JENNIFER Name: Name: Address: 526 CLAIRE ST Address: ORLANDO, FL City-St-Zip: City-St-Zip: Title: DT Title: (X) Change () Addition () Delete Name: GOEB, LAURA Name: WOODS, DAVID Address: 510 JENNIE JEWEL DR. Address: 526 JENNIE JEWEL DR. City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806 Title: PD() Delete Title: () Change () Addition HIERHOLZER, ED Name: Name: Address: 518 JENNIE JEWELL DR Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: Title: DS () Delete Title: () Change () Addition CANFIELD, JULIE Name: Name: 502 JENNIE JEWELL DR Address: Address: ORLANDO, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDWARD HIERHOLZER PD 04/25/2005