

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N28967

FILED  
Oct 10, 2006  
Secretary of State

**Entity Name:** LAKEVIEW VILLAGE CONDOMINIUM NO. 12 ASSOCIATION, INC.

**Current Principal Place of Business:**

882 JACKSON AVE.  
WINTER PARK, FL 32789

**New Principal Place of Business:**

709 E. MICHIGAN ST  
ORLANDO, FL 32806

**Current Mailing Address:**

882 JACKSON AVE.  
WINTER PARK, FL 32789

**New Mailing Address:**

P.O. BOX 560698  
ORLANDO, FL 328560698

**FEI Number:** 59-2992311

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRACKIN, ANDREA L  
882 JACKSON AVE.  
WINTER PARK, FL 32789 US

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

MITCHELL, TRACY L  
709 E. MICHIGAN ST  
ORLANDO, FL 32806 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: TRACY L. MITCHELL

10/10/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SZELIGA, LOUIS  
Address: 5990 SCOTCHWOOD GLEN #104  
City-St-Zip: ORLANDO, FL 32822

Title: SD ( ) Delete  
Name: ENCARNACION, JUDITH  
Address: 5990 SCOTCHWOOD GLEN #107  
City-St-Zip: ORLANDO, FL 32822

Title: TD ( ) Delete  
Name: GREIFENSTEIN, KATHY  
Address: 5980 SCOTCHWOOD GLEN #108  
City-St-Zip: ORLANDO, FL 32822

Title: VD ( ) Delete  
Name: GORDON, ERIC  
Address: 5980 SCOTCHWOOD GLEN #103  
City-St-Zip: ORLANDO, FL 32822

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

Title: PD (X) Change ( ) Addition  
Name: MAVIS, CHRISTOPHER  
Address: 133 STONEY POINT DRIVE  
City-St-Zip: SEBASTIAN, FL 32958

Title: SD (X) Change ( ) Addition  
Name: DRESSER, ERIC  
Address: 17011 HOLBY COURT  
City-St-Zip: LAND O'LAKES, FL 34638

Title: TD (X) Change ( ) Addition  
Name: ENCARNACION, JUDY  
Address: 5990 SCOTCHWOOD GLEN #107  
City-St-Zip: ORLANDO, FL 32822

Title: VD (X) Change ( ) Addition  
Name: MONTSINGER, CYNTHIA  
Address: 5990 SCOTCHWOOD GLEN #102  
City-St-Zip: ORLANDO, FL 32822

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: CYNTHIA MONTSINGER

VP

10/10/2006

Electronic Signature of Signing Officer or Director

Date