


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90122 021 ****61.25

DOCUMENT # N31662			
1. Entity Name LAKE SUZY PROPERTY OWNERS ASSOCIATION, INC.			
Principal Place of Business 11600 SW DALLAS DR N ARCADIA, FL 34269 US		Mailing Address 11600 SW DALLAS DR N ARCADIA, FL 34269 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. 11600 SW DALLAS DRIVE N		Suite, Apt. #, etc. 11600 SW DALLAS DRIVE N	
City & State LAKE SUZY, FL		City & State LAKE SUZY, FL	
Zip 34269		Country US	
01192006		Chg-NP	
CR2E037 (11/05)		Applied For Not Applicable	
4. FEI Number 65-0259307		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DRINKWATER, JOANNA 11600 SW DALLAS DR N LAKE SUZY, FL 34269		7. Name and Address of New Registered Agent Name DRINKWATER, DONALD Street Address (P.O. Box Number is Not Acceptable) 11600 SW DALLAS DRIVE N City LAKE SUZY FL Zip Code 34269	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Donald Drinkwater, Treasurer</u> 1-19-06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD NAME DRINKWATER, JOANNA STREET ADDRESS 11600 SW DALLAS DR N CITY-ST-ZIP LAKE SUZY, FL 34269	<input type="checkbox"/> Delete	TITLE PD NAME DRINKWATER, JOANNA STREET ADDRESS 11600 SW DALLAS DR N CITY-ST-ZIP LAKE SUZY, FL 34269	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD NAME MIHALIK, JOHN STREET ADDRESS 12667 S.W. SUZY AVE. CITY-ST-ZIP LAKE SUZY, FL 34269	<input type="checkbox"/> Delete	TITLE VD NAME MARTELLINI, JOHN STREET ADDRESS 12494 SW Sheri Avenue CITY-ST-ZIP LAKE SUZY, FL 34269	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SD NAME THOMPSON, JUDITH STREET ADDRESS 12961 SW KINGS ROW CITY-ST-ZIP LAKE SUZY, FL 34269	<input type="checkbox"/> Delete	TITLE SD NAME STEPHENS, JOSEPHINE STREET ADDRESS 11669 SW DALLAS DRIVE S CITY-ST-ZIP LAKE SUZY, FL 34269	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD NAME RUDLEY, ANTHONY STREET ADDRESS 11600 SW COURTLY MANOR CITY-ST-ZIP ARCADIA, FL 34269	<input type="checkbox"/> Delete	TITLE TD NAME DRINKWATER, DONALD STREET ADDRESS 11600 SW DALLAS DRIVE N CITY-ST-ZIP LAKE SUZY, FL 34269	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD NAME BUNTEMAYER, JOHN H STREET ADDRESS 12879 SW KINGS ROW CITY-ST-ZIP LAKE SUZY, FL 34269	<input type="checkbox"/> Delete	TITLE VD NAME VISSER, Kenneth STREET ADDRESS 12605 SW KINGS ROW CITY-ST-ZIP LAKE SUZY, FL 34269	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME DWESTER, Wood STREET ADDRESS 11782 SW COURTLY MANOR DRIVE CITY-ST-ZIP LAKE SUZY, FL 34269	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Donald Drinkwater, DONALD DRINKWATER,</u>		Date 1-19-06 941-766-9498	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	