2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2004
Secretary of State

DOCUMENT# N31665

Entity Name: LOST LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

140 LOST LAKE DR STE 1
COCOA, FL 32926 US

New Principal Place of Business:

Current Mailing Address:

140 LOST LAKE DR STE 1
COCOA, FL 32926 US

New Mailing Address:

FEI Number: 59-2950946 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCULLOH, NEAL ESQ.
CLAYTON & MCCULLOH, ATTORNEYS AT LAW
1065 MAITLAND CENTER COMMONS BLVD.
MAITLAND, FL 32751 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: PD ( ) Delete
Name: GILL, JAMES F
Address: 107 AQUARIUS TERRACE
City-St-Zip: COCOA, FL 32926

Title: SD ( ) Delete
Name: CAPATO, KAY
Address: 169 WOODSMILL BLVD
City-St-Zip: COCOA, FL 32926

Title: D ( ) Delete
Name: SHELLEY, PAT
Address: 310 MOSIDIAN RUN DR
City-St-Zip: COCOA, FL 32926

Title: D ( ) Delete
Name: DALTON, JOE
Address: 123 WOODSMILL BLVD
City-St-Zip: COCOA, FL 32926

Title: T ( ) Delete
Name: CHRON, DOT
Address: 305 MERIDAN RUN DR.
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CARON, DOROTHY L
Address: 305 MERIDIAN RUN DR.
City-St-Zip: COCOA, FL 32926

Title: SD (X) Change ( ) Addition
Name: SHELEY, PAT
Address: 310 MERIDIAN RUN DR
City-St-Zip: COCOA, FL 32926

Title: D (X) Change ( ) Addition
Name: LAWSON, LOUIS
Address: 121 WOODSMILL BLVD
City-St-Zip: COCOA, FL 32926

Title: VP (X) Change ( ) Addition
Name: BERNER, AL
Address: 125 LOST LAKES DR
City-St-Zip: COCOA, FL 32926

Title: T (X) Change ( ) Addition
Name: PIOLI, JIM
Address: 309 MERIDAN RUN DR.
City-St-Zip: COCOA, FL 32926

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: DOROTHY L. CARON PD 04/13/2004

Electronic Signature of Signing Officer or Director Date