2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2007 8:00 am
Secretary of State
03-05-2007 90067 001 ****61.25

66020320

DOCUMENT # N33934

1. Entity Name
HARMON OAKS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1289 HARMON AVENUE WINTER PARK, FL 32789 US	1289 HARMON AVENUE WINTER PARK, FL 32789 US

02282007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number
59-2966421
☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LAWS, LEZLIE
1289 HARMON AVE
WINTER PARK, FL 32789

7. Name and Address of New Registered Agent

Name
Lori Caldwell
Street Address (P.O. Box Number is Not Acceptable)
193 Overlook Road
City Winter Park FL 32789

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 Lezlie Laws Lezlie Laws Lori A Caldwell 3/05/07 2/27/07
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, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PS LAWS, LEZLIE 1289 HARMON AVENUE WINTER PARK, FL 32789	☐ Delete	P Lori Caldwell 193 Overlook Dr. Winter Park, FL 32789	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WHITE, GERI 1277 HARMON AVE WINTER PARK, FL 32789	☐ Delete	T Daniel VanDyke ~~RxQxxRaxx888895~~ 1279 Harmon Ave. ~~GrandxR~~ Winter Park, FL 327 32789	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ 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.

Lezlie Laws