

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36331

FILED
Sep 06, 2005
Secretary of State

Entity Name: LAGO WELLEBY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 450821
SUNRISE, FL 333457821

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 450821
SUNRISE, FL 333457821

New Mailing Address:

FEI Number: 65-0302274 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MIKKELSEN, KARL
10699 LAGO WELLEBY DR
SUNRISE, FL 33351 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: STD () Delete
Name: AROCHO-MACDONALD, MARITZA
Address: 10675 LAGO WELLEBY DR
City-St-Zip: SUNRISE, FL 33351

Title: S () Delete
Name: MORRISON, PATRICIA
Address: 10687 LAGO WELLEBY DR
City-St-Zip: SUNRISE, FL 33351

Title: P () Delete
Name: MIKKELSON, KARL
Address: 10699 LAGO WELLEBY DR
City-St-Zip: SUNRISE, FL 33351

Title: VP () Delete
Name: VOLMER, FRED
Address: 10773 LAGO WELLEBY DR
City-St-Zip: SUNRISE, FL 33351

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: AROCHO-MACDONALD, MARITZA
Address: 10675 LAGO WELLEBY DR
City-St-Zip: SUNRISE, FL 33351

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: MIELE, STEVEN
Address: 10633 LAGO WELLEBY DR
City-St-Zip: SUNRISE, FL 33351

Title: D () Change (X) Addition
Name: KONG, JAMES
Address: 10741 LAGO WELLEBY DR
City-St-Zip: SUNRISE, FL 33351

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: MARITZA AROCHO

T

09/06/2005

Electronic Signature of Signing Officer or Director

_____ Date