FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 24 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N42165 (3)

1. Corporation Name

LAKE JOANNA IMPROVEMENT LEAGUE, INC.

Principal Place of Business	Mailing Address
33547 COUNTY ROAD 44-B EUSTIS FL 32726-7227	33547 COUNTY ROAD 44-B EUSTIS FL 32726-7227

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/19/1991
3a. Date of Last Report: 06/30/1994
4. FEI Number: 59-3140059 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21 33405 WESLEY RD	2a. Mailing Address 26 33405 WESLEY RD
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 EUSTIS FL	City & State 28 EUSTIS FL
Zip / Country 24 327267227 / 25	Zip / Country 29 32726-7227 / 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DEAN, DEVERN 33547 COUNTY ROAD 44-B EUSTIS FL 32726	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	DEAN, DEVERN	1.2 NAME	~~CHANGE~~, NO CHANGE
STREET ADDRESS	33547 C.R. 44-B	1.3 STREET ADDRESS	
CITY-ST-ZIP	EUSTIS FL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☑ Change ☐ Addition
NAME	ROGERS, PATRICK	2.2 NAME	V LUSHERE, LEWIS
STREET ADDRESS	33629 WESLEY RD.	2.3 STREET ADDRESS	32639 WESLEY RD
CITY-ST-ZIP	EUSTIS FL	2.4 CITY-ST-ZIP	EUSTIS, FL
TITLE	T	3.1 TITLE	☐ Change ☐ Addition
NAME	BRADNER, MICHAEL	3.2 NAME	
STREET ADDRESS	33618 WESLEY RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	EUSTIS FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	VANLANDINGHAM, DEN	4.2 NAME	
STREET ADDRESS	33469 E. LAKE JOANNA DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	EUSTIS FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	☑ Change ☐ Addition
NAME	DEAN, MARY JO	5.2 NAME	WILSON, DANIEL
STREET ADDRESS	33547 C.R. 44-B	5.3 STREET ADDRESS	33405 WESLEY RD
CITY-ST-ZIP	EUSTIS FL	5.4 CITY-ST-ZIP	EUSTIS, FL
TITLE	D	6.1 TITLE	☑ Change ☐ Addition
NAME	STEWART, ALAN	6.2 NAME	D BARR, GENE
STREET ADDRESS	33349 E. LAKE JOANNA DR.	6.3 STREET ADDRESS	33508 WESLEY RD
CITY-ST-ZIP	EUSTIS FL	6.4 CITY-ST-ZIP	EUSTIS, FL 32726

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: Daniel A. Wilson DANIEL A. WILSON 4/18/95 904-385-4901
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0091837