

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 APR -6 AM 8:13

DOCUMENT # N43232

1. Entity Name  
LAKE HARRIS LANDING RESIDENTS ASSOCIATION, INC.



Principal Place of Business  
28326 LOFT MOUNTAIN DR.  
LEESBURG, FL 34748

Mailing Address  
28326 LOFT MOUNTAIN DR.  
LEESBURG, FL 34748

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04022012

Chg-NP

CR2E037 (12/11)

4. FEI Number  
59-3072421

Applied For  
Not Applicable

6. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

8. Name and Address of Current Registered Agent

LAVEN, ROGER  
28323 RIVER RUN DR.  
LEESBURG, FL 34748

7. Name and Address of New Registered Agent

Name *Grove, Bob*

Street Address (P.O. Box Number is Not Acceptable)

*4623 Swift Run Dr.*

City *Leesburg, FL*

Zip Code  
*34748*

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

*Bob Grove*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

300227710233  
04/06/12--01036--001 \*\*\$61.25

Filing Fee is \$61.25  
Due by May 1, 2012

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

TITLE P ☒ Delete  
NAME LAVEN, ROGER  
STREET ADDRESS 28326 LOFT MOUNTAIN DR.  
CITY-ST-ZIP LEESBURG, FL 34748

TITLE V ☒ Delete  
NAME JUNGBLUTH, CARL  
STREET ADDRESS 28431 HAZEL TOP CT.  
CITY-ST-ZIP LEESBURG, FL 34748

TITLE S ☐ Delete  
NAME WEBB, IRENE  
STREET ADDRESS 28505 HAZEL TOP CT.  
CITY-ST-ZIP LEESBURG, FL 34748

TITLE T ☒ Delete  
NAME EGGERS, JAN  
STREET ADDRESS 28506 HAZEL TOP CT.  
CITY-ST-ZIP LEESBURG, FL 34748

TITLE D ☒ Delete  
NAME PEARSON, DEE  
STREET ADDRESS 28446 HELENA RUN DR  
CITY-ST-ZIP LEESBURG, FL 34748

TITLE D ☒ Delete  
NAME LEGGETT, LARRY  
STREET ADDRESS 28520 HELENA RUN DR  
CITY-ST-ZIP LEESBURG, FL 34748

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE *Grove, Bob* ☐ Change ☒ Addition  
NAME  
STREET ADDRESS *4623 Swift Run Dr.*  
CITY-ST-ZIP *Leesburg, FL 34748*

TITLE *Cassell, Dan* ☐ Change ☒ Addition  
NAME  
STREET ADDRESS *28435 HAZEL TOP CT.*  
CITY-ST-ZIP *Leesburg, FL 34748*

TITLE *Webb, Irene* ☐ Change ☒ Addition  
NAME  
STREET ADDRESS *28505 HAZEL TOP CT.*  
CITY-ST-ZIP *Leesburg, FL 34748*

TITLE *Alstott, Irene* ☐ Change ☒ Addition  
NAME  
STREET ADDRESS *28505 HELENA RUN DR*  
CITY-ST-ZIP *Leesburg, FL 34748*

TITLE *Forest, Jan* ☐ Change ☒ Addition  
NAME  
STREET ADDRESS *28217 River Run Dr.*  
CITY-ST-ZIP *Leesburg, FL 34748*

TITLE *Kudlock, Patricia* ☒ Change ☐ Addition  
NAME  
STREET ADDRESS *28222 River Run, Dr.*  
CITY-ST-ZIP *Leesburg, FL 34748*

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:

*Irene Alstott*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/3/12 Ialstott@AOL.COM*

DATE

E-MAIL ADDRESS

APR 9 2012

T. CAULEY

Peets, Pat  
4607 Skyline Dr.  
Leesburg, Fl. 34748

Pg 282