

**FILED**  
**Mar 23, 1999 8:00 am**  
**Secretary of State**

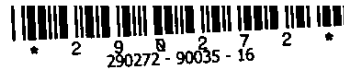
03-23-1999 90064 001 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # N43292  
 1. Corporation Name  
 LAKEMONT HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: 2700 NORTH MACDILL AVENUE, SUITE 115, TAMPA FL 33607-2279  
 Mailing Address: 2700 NORTH MACDILL AVENUE, SUITE 115, TAMPA FL 33607-2279



21 1026 MALLETWOOD	2a. Mailing Address 26 P.O. Box 823	3. Date Incorporated or Qualified 05/08/1991
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 59-3141200
23 City & State BRANDON FL	28 City & State Brandon FL	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24 33510	29 33509-0823	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent FERNANDEZ, JOHN 2700 NORTH MACDILL AVENUE SUITE 115 TAMPA FL 33677	10. Name and Address of New Registered Agent 81 Name ROMERO, PAUL 82 Street Address (P.O. Box Number is Not Acceptable) 1006 PEACHWOOD DRIVE 83 84 City BRANDON FL 85 Zip Code 33510
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, of 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 617.0503, Florida Statutes.  
 SIGNATURE: Paul Romero PAUL ROMERO DATE: March 20, 1999

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	<input checked="" type="checkbox"/> DELETE	1.1 TITLE: PD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: FERNANDEZ, JOHN		1.2 NAME: ROMERO, PAUL	
STREET ADDRESS: 2700 N. MACDILL AVE. 115		1.3 STREET ADDRESS: 1006 PEACHWOOD DRIVE	
CITY-ST-ZIP: TAMPA FL		1.4 CITY-ST-ZIP: BRANDON FL 33510	
TITLE: D	<input checked="" type="checkbox"/> DELETE	2.1 TITLE: SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: FERNANDEZ, MAYNARD		2.2 NAME: BELL, JOYCE	
STREET ADDRESS: 2700 N. MACDILL AVE. 115		2.3 STREET ADDRESS: 1026 MALLETWOOD	
CITY-ST-ZIP: TAMPA FL		2.4 CITY-ST-ZIP: BRANDON FL 33510	
TITLE: D	<input checked="" type="checkbox"/> DELETE	3.1 TITLE: PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: LLANES, LIONEL		3.2 NAME: JACOB, MAURICE	
STREET ADDRESS: 2700 N. MACDILL AVE. 115		3.3 STREET ADDRESS: 1048 MALLETWOOD	
CITY-ST-ZIP: TAMPA FL		3.4 CITY-ST-ZIP: BRANDON FL 33510	
TITLE:	<input type="checkbox"/> DELETE	4.1 TITLE: V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME:		4.2 NAME: ERBLAND, PHELIP	
STREET ADDRESS:		4.3 STREET ADDRESS: 907 SANDYWOOD	
CITY-ST-ZIP:		4.4 CITY-ST-ZIP: BRANDON FL 33510	
TITLE:	<input type="checkbox"/> DELETE	5.1 TITLE: V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME:		5.2 NAME: COFFMEYER, MIKE	
STREET ADDRESS:		5.3 STREET ADDRESS: 1031 MALLETWOOD	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP: BRANDON, FL 33510	
TITLE:	<input type="checkbox"/> DELETE	6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	
CITY-ST-ZIP:		6.4 CITY-ST-ZIP:	

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE: Paul Romero SIGNATURE REQUIRED PAUL ROMERO DATE: Mar. 20, 1999 (813) 661-6564

CR2E037 (1/98)