

MP

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Mar 06 1997 8:00am
Secretary of State

NON-PROFIT CORPORATION
ANNUAL REPORT
1997

DOCUMENT # **N47143 (5)**

1. Corporation Name
LAKE YALE ESTATES HOMEOWNERS ASSOCIATION, INC.

L.Y.E.H. Association
38141 Maywood Bay Drive
Leesburg, Florida
34788

L.Y.E.H. Association
38141 Maywood Bay Drive
Leesburg, Florida
34788



2. Principal Place of Business
L.Y.E.H. Association
38141 Maywood Bay Drive
Leesburg, Florida
34788

2a. Mailing Address
L.Y.E.H. Association
38141 Maywood Bay Drive
Leesburg, Florida
34788

3. Date Incorporated or Qualified **02/07/1992** 3a. Date of Last Report **02/14/1996**

4. FEI Number **NOT APPLICABLE** Applied For ☐ Not Applicable ☒

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

24. **27188** 25. **45** 29. **24788** 30. **FL**

9. Name and Address of Current Registered Agent
JARVEY, MARCIA
37802-84-CR 452
LEESBURG FL 34788

10. Name and Address of New Registered Agent

81 Name **GEORGE JONES**

82 Street Address (P.O. Box Number is Not Acceptable)
38100 MAYWOOD BAY DR.

83

84 City **LEESBURG, FLA.** FL 85 Zip Code **34788**

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, 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 617.0503, Florida Statutes.

SIGNATURE **GEORGE JONES**

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

(NOTE: Registered Agent signature required when registering)

DATE **2/17/97**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
T	KANE, CAMILLE J.	37802-85-CR 452	LEESBURG FL	<input type="checkbox"/>
V	STOEHR, RICHARD	37802-85-CR452	LEESBURG FL	<input type="checkbox"/>
S	GERWIG, SHIRLEY	37802-68 CR452	LEESBURG FL	<input type="checkbox"/>
D	DEBOER, JACQUELINE	37802-123 CR452	LEESBURG FL	<input type="checkbox"/>
PS	HARVEY, MARCIA	37802-34-CR 452	LEESBURG FL	<input checked="" type="checkbox"/>
D	PRICE, BOYCE	37802-125-CR 452	LEESBURG FL	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
		37907 MAYWOOD BAY DR.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
		37804 MAYWOOD BAY DR.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
		11843 METCALF WAY		<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
		38118 MAYWOOD BAY DR.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
	PS GEORGE JONES	38100 MAYWOOD BAY DR	LEESBURG, FL. 34788	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition
		38130 MAYWOOD BAY DR.		<input checked="" type="checkbox"/>	<input type="checkbox"/>

14. I do 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.

SIGNATURE:

CAMILLE J. KANE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-97

Date

1-352-357-8973

Daytime Phone # 0079846

CR2E037 (9/96)