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Apr 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N47748 (1)
1. Corporation Name
**LAKE LOUISA & LAKE NELLIE OAKS HOMEOWNERS' ASSN.
, INC.**

Principal Place of Business P.O. BOX 120561 CLERMONT FL 34712	Mailing Address P.O. BOX 120561 CLERMONT FL 34712
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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3. Date Incorporated or Qualified 03/09/1992	4. FEI Number 59-3122921	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	
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No		

9. Name and Address of Current Registered Agent RAMBOZ, SYLVIA C 9012 MOSSY OAK LN. CLERMONT FL 34711	10. Name and Address of New Registered Agent 81 Name SHERI A. MOSELY 82 Street Address (P.O. Box Number is Not Acceptable) 11819 DSWALT RD 83 84 City CLERMONT FL 85 Zip Code 34711
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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, 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 *Sheri A. Mosely, Secretary/Treasurer* DATE **4-12-98**
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 NAME STREET ADDRESS CITY-ST-ZIP	P FORD, RICK 11541 NELLIE OAKS BEND CLERMONT FL ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P JAN GOUDY 9045 MOSSY OAK LANE CLERMONT, FL 34711 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V IRVIN, DAVID 9123 MOSSY OAK LANE CLERMONT FL ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	V Glenn SWANSON 11651 NELLIE OAKS BEND CLERMONT, FL 34711 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RAMBOZ, SYLVIA C 9012 MOSSY OAK LN. CLERMONT FL ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ST SHERI MOSELY 11819 DSWALT RD. CLERMONT, FL 34711 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAROLE, JUDY 9006 MOSSY OAK LANE CLERMONT FL ☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	D MELINDA NEWTON 9145 MOSSY OAK LN CLERMONT, FL 34711 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAKE, CRAIG 11503 NELLIE OAKS BEND CLERMONT FL ☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D JIM WIEDEMAN 9030 MOSSY OAK LN CLERMONT FL 34711 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, CURTIS 9018 MOSSY OAK LN. CLERMONT FL ☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	D JIM WIEDEMAN 9030 MOSSY OAK LN CLERMONT FL 34711 ☒ Change ☐ Addition

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.

SIGNATURE: *Sheri A. Mosely* **SHERI A. MOSELY** **4-12-98** **352-242-0144**

CR2E037 (10/97)