

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49245

FILED
Aug 29, 2004
Secretary of State**Entity Name:** LAKE ELLA MANOR HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**36805 TAYLOR MILL RD
FRUITLAND PARK, FL 34731 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 544
FRUITLAND PARK, FL 347310544 US**New Mailing Address:****FEI Number:** 59-3182452**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NORVEL, MIKE
1410 EMERSON ST
LEESBURG, FL 34748 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** DP () Delete
Name: THOMPSON, CHARLES
Address: 36805 TAYLOR MILL RD
City-St-Zip: FRUITLAND PARK, FL 34731**Title:** DST () Delete
Name: MASON, NORMAN
Address: 36828 TAYLOR MILL RD.
City-St-Zip: FRUITLAND PARK, FL 34731**Title:** VD () Delete
Name: LEVENDIS, KAREN
Address: 36819 TAYLOR MILL RD
City-St-Zip: FRUITLAND PARK, FL 34731**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** DST (X) Change () Addition
Name: MULFORD, GEORGE REV
Address: 36913 TAYLOR MILL RD.
City-St-Zip: FRUITLAND PARK, FL 34731**Title:** VD (X) Change () Addition
Name: SHUMAKE, SHARON
Address: 36945 TAYLOR MILL RD
City-St-Zip: FRUITLAND PARK, FL 34731

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES O THOMPSON

DP

08/29/2004

Electronic Signature of Signing Officer or Director_____
Date