

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000062

FILED
Apr 18, 2007
Secretary of State

Entity Name: LAKE WASHINGTON OAKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 360458
MELBOURNE, FL 32936 US

New Principal Place of Business:

RUSTIC WAY
MELBOURNE, FL 32936 US

Current Mailing Address:

P.O. BOX 360458
MELBOURNE, FL 32936 US

New Mailing Address:

FEI Number: 59-3151141 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CALABRESE, GRAIG
1674 RUSTIC WAY
MELBOURNE, FL 32935 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: SD () Delete
Name: LE KARCZYK, ROBERT
Address: 1666 RUSTIC WAY
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: CAISANGO, THOMAS
Address: 1635 RUSTIC WAY
City-St-Zip: MELBOURNE, FL 32935

Title: TD () Delete
Name: CALABRESE, GRAIG
Address: 1650 RUSTIC WAY
City-St-Zip: MELBOURNE, FL 32935

Title: VD () Delete
Name: TAYLOR, RONALD
Address: 1695 RUSTIC WAY
City-St-Zip: MELBOURNE, FL 32935

Title: PD () Delete
Name: DURRANCE, PAUL
Address: 1694 RUSTIC WAY
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: G. A. CALABRESE

TD

04/18/2007

Electronic Signature of Signing Officer or Director

Date