

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2007 8:00 am
Secretary of State

03-02-2007 90009 039 ****61.25

DOCUMENT # N92000000485

1. Entity Name
RESERVATION LAKES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**904 NAVAHO TR
MULBERRY, FL 33860 US**

Mailing Address
**904 NAVAHO TR
MULBERRY, FL 33860 US**

40027486



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02052007

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-3155271

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MATZ, JAMES
904 NAVAHO TRAIL
MULBERRY, FL 33860**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when accepting)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BILLINGSLEY, ANDRIAN J 400 APACHE TR MULBERRY, FL 33860	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MATZ, JAMES 904 NAVAHO TR MULBERRY, FL 33860	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JONES, KAREN 210 CHEROKEE TR MULBERRY, FL 33860	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOOVER, DUANNE 231 CHEROKEE TR MULBERRY, FL 33860	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, JAN 1107 IROQUOIS TR MULBERRY, FL 33860	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WOLD, PEPPER 132 ALGONQUIN TRAIL MULBERRY, FL 33860	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D molina, David 900 NAVAHO TRAIL mulberry, FL 33860	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D miller, Lucy 904 NAVAHO TRAIL mulberry, FL 33860	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JAN Kennedy 1107 Iroquois Trail mulberry, FL 33860	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Jackson, Carolyn 1115 Iroquois Trail mulberry, FL 33860	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jones, WILHA 829 Cherokee Trail mulberry, FL 33860	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *James Matz* **JAMES MATZ, President**

Signature and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-28-07 **863-425-9131**

Date

Daytime Phone #