


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 05, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N93000004023</b>	
1. Entity Name NORTHLAKE DRAINAGE ASSOCIATION, INC.	

Principal Place of Business P.O. BOX 428 MANGO, FL 33550 US	Mailing Address P.O. BOX 428 MANGO, FL 33550 US
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01122005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3240072	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  JAEB, STEPHEN L 11505 E. BROADWAY MANGO, FL 33550
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2005**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST JAEB, STEPHEN L 11505 E. BROADWAY MANGO, FL 335500428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILLIAMS, TYLER 1203 TOWNSGATE COURT PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BROWN, STEVE 205 S HOOVER BLVD STE 305 TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HIGGINBOTHAM, RICHARD 5912 BREKENRIDGE PARKWAY STE A TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILAM, WILLIAM 300 TECHNOLOGY COURT SMYRNA, GA 30082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000288792  
04/05/05-80024-010 61.25

12. 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 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: Stephen L. Jaeb 3/31/05 813-681-5796  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #