


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N93000004218.

1. Entity Name
LAKE LOUISE ESTATES HOMEOWNERS ASSOCIATION
INC.



Principal Place of Business 7475 63RD COURT LIVE OAK, FL 32060-475 US	Mailing Address 7475 63RD COURT LIVE OAK, FL 32060-475 US
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DO NOT WRITE IN THIS SPACE



04242006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-3217663	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BURNHAM, GEORGE L JR.
7416 65TH DR
LIVE OAK, FL 32060

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

**Filing Fee is \$61.25
Due by May 1, 2006**

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	P BURNHAM, GEORGE L JR. 10556 70TH STREET LIVE OAK, FL 32060
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, MICKEY 6560 76TH ST. LIVE OAK, FL 32060
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D READ, BEVERLY A 7440 65TH DRIVE LIVE OAK, FL 32060
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST TODD, LAWRENCE 8786 86TH STREET LIVE OAK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCGRANHAM, BOB 10709 84TH STREET MCALPIN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CATHCART, RICHARD 10150 80TH TERRACE LIVE OAK, FL 32060

U00000539969
05/09/06-80118-025 61.25

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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: Todd Lawrence Sec / Treas 4/24/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #