

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001272

FILED
Jan 04, 2007
Secretary of State

Entity Name: LINCOLNSHIRE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1071 DONEGAN RD
LARGO, FL 33771 US

New Principal Place of Business:

Current Mailing Address:

1071 DONEGAN RD
#163
LARGO, FL 33771 US

New Mailing Address:

FEI Number: 74-2784131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARGA, CYNTHIA M
1071 DONEGAN RD
#163
LARGO, FL 33771 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: D () Delete
Name: VARGA, CYNTHIA M
Address: 1071 DONEGAN RD. #163
City-St-Zip: LARGO, FL 33771 US

Title: TREA () Delete
Name: JONES, LESLIE
Address: 1071 DONEGAN RD. LOT #921
City-St-Zip: LARGO, FL 33771 US

Title: D () Delete
Name: MARSHALL, ROY
Address: 1071 DONEGAN RD. #1349
City-St-Zip: LARGO, FL 33771 US

Title: D () Delete
Name: JONES, EILEEN
Address: 1071 DONEGAN RD. #921
City-St-Zip: LARGO, FL 33771 US

Title: VP () Delete
Name: JACOB, EDWARD
Address: 1071 DONEGAN RD #305
City-St-Zip: LARGO, FL 33771 US

Title: P () Delete
Name: CHARRON, RACHEL
Address: 1071 DONEGAN RD #832
City-St-Zip: LARGO, FL 33771 US

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: VP (X) Change () Addition
Name: RUSSO, WILLIAM
Address: 1071 DONEGAN RD #1437
City-St-Zip: LARGO, FL 33771 US

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: CYNTHIA M. VARGA

DIR

01/04/2007

Electronic Signature of Signing Officer or Director

Date