

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2007 8:00 am
Secretary of State

03-08-2007 90023 032 ****61.25

DOCUMENT # N96000001648

1. Entity Name

LAKEVIEW IN THE HILLS MOBILE HOMEOWNERS
ASSOCIATION, INC.



Principal Place of Business

10515 US HIGHWAY 301
DADE CITY FL 33525
US

Mailing Address

37908 LAKE GILBERT CIR
DADE CITY FL 33525
US



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

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-3362490

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRITTEN, VIRGINIA P
37908 LAKE GILBERT CIRCLE
DADE CITY FL 33525

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 reinstating)

DATE

FILE NOW: 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

NAME	VD	☒ Delete
NAME	FITZSIMMONS, DEE	
STREET ADDRESS	37808 LAKE GILBERT CIRCLE	
CITY ST ZIP	DADE CITY FL 33525	
NAME	SD	☒ Delete
NAME	ROJAS, DOROTHY	
STREET ADDRESS	37912 LAKE GILBERT CIR	
CITY ST ZIP	DADE CITY FL 33525	
NAME	T	☒ Delete
NAME	RESEER, MUDREY	
STREET ADDRESS	37918 LAKE GILBERT CIRCLE	
CITY ST ZIP	DADE CITY FL 33525	
NAME	RA	☐ Delete
NAME	BRITTEN, VIRGINIA	
STREET ADDRESS	37908 LAKE GILBERT CIRCLE	
CITY ST ZIP	DADE CITY FL 33525	
NAME	P	☒ Delete
NAME	WATERSON, GEORGE	
STREET ADDRESS	37914 LAKE GILBERT CIR	
CITY ST ZIP	DADE CITY FL 33525	
NAME		☐ Delete
NAME		
STREET ADDRESS		
CITY ST ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

NAME	PAUL A WHITNEY	☒ Change ☐ Addition
STREET ADDRESS	37819 LAKE GILBERT CR.	
CITY ST ZIP	DADE CITY, FL. 33525	
NAME	SD	☒ Change ☐ Addition
NAME	DOROTHY WHITNEY	
STREET ADDRESS	37819 LAKE GILBERT CR.	
CITY ST ZIP	DADE CITY, FL. 33525	
NAME	T	☒ Change ☐ Addition
NAME	AUDREY KESLER	
STREET ADDRESS	37918 LAKE GILBERT CR	
CITY ST ZIP	DADE CITY, FL 33525	
NAME		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
NAME	P	☐ Change ☐ Addition
NAME	LAURA A. WRAY	
STREET ADDRESS	37813 LAKE GILBERT CR	
CITY ST ZIP	DADE CITY, FL 33525	
NAME		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Dorothy Whitney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/07

352
458-3525
Date Daytime Phone #