

FILE NOW: FILING FEE IS \$61.25

FILED
Sep 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # N96000002874
1. Corporation Name

LAKE DOWNEY MOBILE PARK HOMEOWNERS
ASSOCIATION, INC.

Principal Place of Business Mailing Address

3. Date Incorporated or Qualified
05/24/96

4. FEI Number ☒ Applied For
☒ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 9857 Downey Cove Dr.	26 9857 Downey Cove Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 Orlando, FL	28 Orlando, FL
Zip Country	Zip Country
24 32825 25 USA	29 32825 30 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

7. Is this nonprofit corporation a homeowners association? ☒ Yes ☒ No

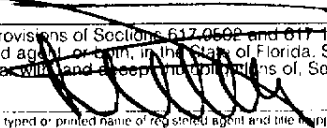
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name	Michael L. Resnick
82 Street Address (P.O. Box Number is Not Acceptable)	1342 E. Vine Street, Suite 236
83	
84 City	Kissimmee FL
85 Zip Code	34744

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE 
Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

5/15/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	Director	☐ DELETE
NAME	John Lewalski	
STREET ADDRESS	9857 Downey Cove Dr.	
CITY-ST-ZIP	Orlando, FL 32825	
TITLE	Robert Couture	☒ DELETE
NAME	Robert Couture	
STREET ADDRESS	9834 Downey Cove Drive	
CITY-ST-ZIP	Orlando, FL 32825	
TITLE	Director	☐ DELETE
NAME	Audrey Turner	
STREET ADDRESS	Orlando, FL 32825	
CITY-ST-ZIP	Orlando, FL 32825	
TITLE	Director	☒ DELETE
NAME	James English	
STREET ADDRESS	9828 Downey Hill Street	
CITY-ST-ZIP	Orlando, FL 32825	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Director	☒ Change ☐ Addition
2.2 NAME	Audrey Turner	
2.3 STREET ADDRESS	9850 Downey Cove Drive	
2.4 CITY-ST-ZIP	Orlando, FL 32825	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME	400002631934	
3.3 STREET ADDRESS	-09/04/98--01014--045	
3.4 CITY-ST-ZIP	***61.25	
4.1 TITLE	Director	☒ Change ☐ Addition
4.2 NAME	Bill Simoneau	
4.3 STREET ADDRESS	9800 Downey Hill Street	
4.4 CITY-ST-ZIP	Orlando, FL 32825	
5.1 TITLE	Director	☐ Change ☒ Addition
5.2 NAME	Veronica Arrp	
5.3 STREET ADDRESS	9830 Downey Cove Drive	
5.4 CITY-ST-ZIP	Orlando, FL 32825	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John A. Lewalski

CR2E037 (10/97)