2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007
Secretary of State

DOCUMENT# N96000004273

Entity Name: L M S HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

33638 LAKE MYRTLE BLVD
LEESBURG, FL 34748 US

New Principal Place of Business:

Current Mailing Address:

33638 LAKE MYRTLE BLVD
LEESBURG, FL 34748 US

New Mailing Address:

FEI Number: 59-3482881 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROBBINS, LESLIE
33638 LAKE MYRTLE BLVD
LEESBURG, FL 34748 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:	PD	( ) Delete
Name:	KESSLER, RONALD H SR	
Address:	33542 LAKE MYRTLE BLVD	
City-St-Zip:	LEESBURG, FL 34748	
Title:	VD	( ) Delete
Name:	JONES, RAYMOND W	
Address:	33526 LAKE MYRTLE BLVD.	
City-St-Zip:	LEESBURG, FL 34748	
Title:	SD	( ) Delete
Name:	ZIPPERER, AUDREY	
Address:	33639 LAKE MYRTLE BLVD	
City-St-Zip:	LEESBURG, FL 34748	
Title:	TD	( ) Delete
Name:	POLLITT, MELINDA K	
Address:	33615 LAKE MYRTLE BLVD.	
City-St-Zip:	LEESBURG, FL 34748	
Title:	VD	( ) Delete
Name:	ROBBINS, LESLIE B	
Address:	33638 LAKE MYRTLE BLVD	
City-St-Zip:	LEESBURG, FL 34748	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: LESLIE B. ROBBINS VD 05/02/2007

Electronic Signature of Signing Officer or Director — Date