## **2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## FILED Apr 20, 2005 8:00 am Secretary of State

1. Entity Nam	MENT # N98000000 LAKES OWNERS COMMI		-			04-20-2005 90	0362 021 ****	70.00
3939 HOLLIS AVENUE 3			Mailing Address 3939 HOLLIS AVENUE PORT CHARLOTTE, FL 33953				50041	.330
2. Principal P	lace of Business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		تداحس المنظ	-04122005 Cr	ng-NP CF	R2E037 (10/03) - 1	
City & State		City & State	City & State		4. FEI Number NOT APPLI	CABLE	<del> </del>	plied For t Applicable
Zip	Country	Zip	Co	untry	5. Certificate of St	atus Desired	\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New Regist	tered Agent	
1 5 (IN AND	O TANINESIDALINA DA			Name				
1680 FRU SUITE 102				Street Address	(P.O. Box Number is f	Not Acceptable)		
	A, FL 34236							•
	, 75 3 3		·	City			FL Zip Code	э
8. The above	named entity submits this statement for	or the purpose of changin	g its register	red office or registe	ered agent, or both, in	the State of Florida.	I am familiar with,	and accept
	tions of registered agent.							h h
	ions of registered agent.							
the obligat		and title if applicable.	(NOTE: Registere	ed Agent signature require	id when reinstating)		DATE	
the obligat	ions of registered agent.	9. Election	(NOTE: Registere  Campaign I	Financing	\$5.00 May Be Added to Fees	Make e	DATE check payable to Department of St	
the obligat	Signature, lyped or printed name of registered agent	9. Election Trust Fu	Campaign l	Financing tion.	\$5.00 May Be	Make ( Florida D	check payable to Department of St	ate
the obligat	Signature, lyped or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2005	9. Election Trust Fu	ı Campaign I	Financing tition.	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Make (Florida D	check payable to Department of St	ate
signature	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2005  OFFICERS AND DI PD CHARLES, EVERETT	9. Election Trust Fu RECTORS	Campaign I and Contribu	Financing tion.   LE ME	\$5.00 May Be Added to Fees ADDITIONS/CHANG PD Robert He	Make (Florida Des TO OFFICERS AF	check payable to Department of Storio DIRECTORS IN Earnge	10
SIGNATURE  10.  TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent  Filling Fee is \$61.25  Due by May 1, 2005  OFFICERS AND DI  PD  CHARLES, EVERETT  14362 WEEKSONIA AVE.	9. Election Trust Fu RECTORS	Campaign I and Contribu 11. THE NAM STR	Financing tion.   LE ME	\$5.00 May Be Added to Fees ADDITIONS/CHANG PD Robert He	Make (Florida Des TO OFFICERS AF	check payable to Department of Storio DIRECTORS IN Earnge	10
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12. 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 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: Elizabeth Bryan-Rich Elizabeth
SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICE OR DIRECTOR 04-15-05 941-764-0603