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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 770710

1. Corporation Name

LOCKMAR ESTATES HOMEOWNERS ASSOCIATION, INCORPORATED

Principal Place of Business

P.O. BOX 061387  
 PALM BAY FL 32906-8387

Mailing Address

P.O. BOX 061387  
 PALM BAY FL 32906-8387



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	10/12/1983	
22	City & State	27	City & State	4. FEI Number	Applied For
23	Zip	28	Country	59-2386427	Not Applicable
24	Country	29	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25	Country	30	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DALE, ANDREA 342 PEPPER ST NE PALM BAY FL 32907				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

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: *Andrea Dale* Treasurer DATE: 3-2-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D CHRISTOPHER KING 838 NELSON AVE NE PALM BAY FL	1.1 TITLE	D Jephthah Ashmeade 955 Sierra Place Palm Bay FL 32907
NAME	S BOIKO, GEN 826 NELSON AVE PALM BAY FL 32907	2.1 TITLE	S Sue Tallet 125 Nemo Circle Palm Bay FL 32907
STREET ADDRESS	T DALE, ANDREA 342 PEPPER ST NE PALM BAY FL 32907	2.2 NAME	D Don LaFortune 702 Corona Ave Palm Bay FL 32907
CITY-ST-ZIP	D HOBBS, MICHAEL 700 PINEDA AVE NE PALM BAY FL	2.3 STREET ADDRESS	
TITLE	D D'O'BRIEN DAVID 833 HAFTEZ ST NE PALM BAY FL	2.4 CITY-ST-ZIP	
NAME	D CALDWELL, JEAN 807 EMERSON DR PALM BAY FL 32907	3.1 TITLE	
STREET ADDRESS		3.2 NAME	
CITY-ST-ZIP		3.3 STREET ADDRESS	
TITLE		3.4 CITY-ST-ZIP	
NAME		4.1 TITLE	
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
TITLE		4.4 CITY-ST-ZIP	
NAME		5.1 TITLE	
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
TITLE		5.4 CITY-ST-ZIP	
NAME		6.1 TITLE	
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
TITLE		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, with all other like empowered.

SIGNATURE: *Andrea Dale* DATE: 3-2-99 DAYTIME PHONE #: 726-9680

CR2E037 (11/98)