

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720896

FILED  
Feb 08, 2011  
Secretary of State

**Entity Name:** LAFAYETTE OAKS HOMES ASSOCIATION, INC.

**Current Principal Place of Business:**

5306 TOURAINE DRIVE  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

**Current Mailing Address:**

5306 TOURAINE DRIVE  
TALLAHASSEE, FL 32308 US

**New Mailing Address:**

FEI Number: 23-7119200

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SUNDERHAUS, CAROL  
2203 BOURGOGNE DR  
TALLAHASSEE, FL 32308 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  
Name: FLOYD, DEBBIE  
Address: 5511 TOURAINE DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD  
Name: SWEARINGEN, ROB  
Address: 5159 ILE DE FRANCE DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD  
Name: TURNER, LUCY  
Address: 2407 MONACO DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VD  
Name: APODACA, MARY  
Address: 2364 TOUR EIFFEL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: SMITH, BILL  
Address: 5500 TOURAINE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: LAWHON, LES  
Address: 5404 TOURAINE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

I hereby 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 all other like empowered.

SIGNATURE: ROBERT D. SWEARINGEN

TD

02/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date