

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722200

FILED
Apr 02, 2009
Secretary of State

Entity Name: LAKE FAIRVIEW CONDOMINIUM, INC.

Current Principal Place of Business:

% 4328 EDGEWATER DR., SUITE 101
ORLANDO, FL 32804 US

New Principal Place of Business:

4004 EDGEWATER DRIVE
ORLANDO, FL 32804 US

Current Mailing Address:

4004 EDGEWATER DRIVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-1476662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, MARY
ASSET REAL ESTATE INC.
4004 EDGEWATER DRIVE
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

ASSET REAL ESTATE INC
4004 EDGEWATER DRIVE
ORLANDO, FL 32804 US

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: MARY RIVERA

04/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LISKA, GEORGE
Address: 4328 EDGEWATER DR C201
City-St-Zip: ORLANDO, FL 32804

Title: SD () Delete
Name: GRAY, PAULA
Address: 159 BURKS CIRCLE
City-St-Zip: WINTER PARK, FL 32789

Title: TD () Delete
Name: HAHN, JOHN E
Address: 4328 EDGEWATER DR., C205
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: TERON, NELLY
Address: 321 PORTSMOUTH ST
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: BROWN, DONALD
Address: 4328 EDGEWATER DR, E101
City-St-Zip: ORLANDO, FL 32804

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: D (X) Change () Addition
Name: TERAN, NELLY
Address: 321 PORTSMOUTH ST
City-St-Zip: ORLANDO, FL 32804

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: GEORGE LISKA

PD

04/02/2009

Electronic Signature of Signing Officer or Director

Date