## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#740566** 

FILED Apr 25, 2009 Secretary of State

Entity Name: LAKE CHARA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:  14121 S.W. 92ND AVENUE MIAMI, FL 33176  Current Mailing Address:			New Principal Plac	New Principal Place of Business:  New Mailing Address:	
			New Mailing Addre		
14121 S.W MIAMI, FL	7. 92ND AVENU 33176	JE			
FEI Number:	59-1776099	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
	E, DOROTHY 7. 92ND AVENU 33176 US	JE			
	named entity s e of Florida.	ubmits this statement for the p	urpose of changing its registe	red office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	c Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () WILLIAMS, ELD 9061 S.W. 1447 MIAMI, FL 3317	H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () PARRA, BREND 14201 S.W. 92N MIAMI, FL 3317	ID AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD () DONAHUE, DOF 14121 S.W. 92N MIAMI, FL 3317	ID AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () WELLENS, ALB 9101 S.W. 1447 MIAMI, FL 3317	H STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	VP () PEREZ, ARMAN	Delete	Title: Name:	( ) Change ( ) Addition	

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: DOROTHY DONAHUE TD 04/25/2009