2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 759569

FILED Jun 02, 2<u>00</u>9 Secretary of State

Entity Name: LAKESHORE COLONY MASTER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

41 S LAKESHORE DR HYPOLUXO, FL 33462 US

Current Mailing Address: New Mailing Address:

41 S LAKESHORE DR C/O QUALITY MANAGEMENT GROUP, INC 9045 LA FONTANA BLVD. STE 101 HYPOLUXO, FL 33462 US BOCA RATON, FL 33434

FEI Number: 59-2266151 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PEASE, DAVID GELFAND & ARPE, P. A. 163 N LAKESHORE DR 1555 PALM BEACH LAKES BLVD. HYPOLUXO, FL 33462 US SUITE 1220 WEST PALM BCH, FL 33401 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: MICHAEL GELFAND 06/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition GUSTY, EDWARD J ELMORE, DEBRA Name: Name: 8200 LAKESHORE DR APT 308 Address: 9045 LA FONTANA BLVD STE 101 Address: City-St-Zip: HYPOLUXO, FL 33462 City-St-Zip: BOCA RATON, FL 33434 () Delete Title:

(X) Change () Addition Title: ELMORE, DEBRA Name: MCINTOCH, JOHN Name: Address: 96 N LAKESHORE DR Address: 9045 LA FONTANA BLVD. STE 101 City-St-Zip: HYPOLUKO, FL 33462 City-St-Zip: BOCA RATON, FL 33434

Title: () Delete Title: (X) Change () Addition MAKILA, PETER J WAYNE, MARIAN Name: Name: 26 S LAKESHORE DR 9045 LA FONTANA BLVD. STE 101 Address: Address:

City-St-Zip: HYPOLUXO, FL 33462 City-St-Zip: BOCA RATON, FL 33434

Title: () Delete Title: (X) Change () Addition MCINTOSH, JOHN Name: Name: MAKILA, PETER J 9045 LA FONTANA BLVD. STE 101 Address: 121 N LAKESHORE DR Address: City-St-Zip: HYPOLUXO, FL 33462 City-St-Zip: BOCA RATON, FL 33434

Title: () Delete Title: (X) Change () Addition WAYNE, MARIAN HASS, ROY Name: Name:

3 S LAKESHORE DR 9045 LA FONTANA BLVD. STE 101 Address: Address: HYPOLUXO, FL 33462 City-St-Zip: BOCA RATON, FL 33434

City-St-Zip:

Title: () Delete Title: () Change (X) Addition PEASE DAVID Name: Name:

Address: Address: 9045 LA FONTANA BLVD. STE 101 BOCA RATON, FL 33434 City-St-Zip: 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: DEBRA ELMORE Ρ 06/02/2009