2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759569

FILED Apr 16, 2012 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:

C/O QUALITY MANAGEMENT GROUP, INC 9045 LA FONTANA BLVD. STE 101 BOCA RATON, FL 33434 US

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

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

GELFAND & ARPE, P. A. 1555 PALM BEACH LAKES BLVD. 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: ELMORE, DEBRA

Address: 9045 LA FONTANA BLVD STE 101 City-St-Zip: BOCA RATON, FL 33434

Title: VP

Name: RAMSEY, HOWARD

Address: 9045 LA FONTANA BLVD. STE 101

City-St-Zip: BOCA RATON, FL 33434

Title:

Name: LEONARD, AL

Address: 9045 LA FONTANA BLVD. STE 101

City-St-Zip: BOCA RATON, FL 33434

Title:

Name: WAYNE, MARIAN

Address: 9045 LA FONTANA BLVD. STE 101

City-St-Zip: BOCA RATON, FL 33434

Title:

Name: HAAS, ROY

Address: 9045 LA FONTANA BLVD. STE 101

City-St-Zip: BOCA RATON, FL 33434

Title:

Name: TINGLE, GARY

Address: 9045 LA FONTANA BLVD. STE 101

City-St-Zip: BOCA RATON, FL 33434

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: MARIAN WAYNE S 04/16/2012