

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00269

FILED  
Jan 31, 2009  
Secretary of State

Entity Name: GEORGE'S LIGHTHOUSE POINT HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

109 S. MAIN STREET  
HAVANA, FL 32333 US

## New Principal Place of Business:

25 MASHES SANDS RD  
PANACEA, FL 32346 US

## Current Mailing Address:

109 S. MAIN STREET  
HAVANA, FL 32333 US

## New Mailing Address:

FEI Number: 59-2530607      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JASPER, RICHARD  
3043 HAWKS LANDING  
TALLAHASSEE, FL 32308 US

## Name and Address of New Registered Agent:

JASPER, RICHARD  
3043 HAWKS LANDING  
TALLAHASSEE, FL 32309 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

01/31/2009

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SAPP, JAMES  
Address: 2253 MONAGHAN DR.  
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD ( ) Delete  
Name: JASPER, RICHARD  
Address: 3043 HAWKS LANDING  
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD ( ) Delete  
Name: KENT, SANDRA  
Address: 2467 VICEROY COURT  
City-St-Zip: TALLAHASSEE, FL 32308

Title: S ( ) Delete  
Name: POOLE, LUCY  
Address: 2982 GOLDEN EAGLE DR EAST  
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete  
Name: PAKER, PAUL  
Address: 2707 MILLER LANDING ROAD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete  
Name: JAMES, T.D.  
Address: SEREN BRIDARS ROAD  
City-St-Zip: MONTICELLO, FL 32344

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: KENT, SANDRA  
Address: 2467 VICEROY COURT  
City-St-Zip: TALLAHASSEE, FL 32308

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES R. ASHMORE

Electronic Signature of Signing Officer or Director

CPA

01/31/2009

Date