2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02235

FILED May 01, 2009 Secretary of State

Entity Name: UNO LAGO ENVIRONMENTAL ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 801 UNOLAGO DR JUNO BEACH, FL 33408 **Current Mailing Address: New Mailing Address:** 801 UNO LAGO DR JUNO BEACH, FL 33408 FEI Number: 59-2654206 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHAPNICK, MICHAEL E ESQ CHAPNICK, MICHAEL E ESQ 100 EAST LINTON BLVD 100 EAST LINTON BLVD SUITE 502-B SUITE 102-B DELRAY BEACH, FL 33483 US DELRAY BEACH, FL 33483 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: 05/01/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CAUDELL, CATHY Name: Name: 5 UNO LAGO DRIVE Address: Address: City-St-Zip: JUNO BEACH, FL 33408 City-St-Zip: Title: DS Title: DS (X) Change () Addition () Delete Name: UHR, ADELE Name: BASILONE, BOBBI Address: 600 UNO LAGO DRIVE #405 Address: 81441 LOST VALLEY DRIVE City-St-Zip: JUNO BEACH, FL 33408 City-St-Zip: MARS, PA 16046 Title: () Delete Title: (X) Change () Addition BARNETT, CHRIS Name: SANLORENZO, LOU Name: 400 UNO LAGO DRIVE #104 1189 GOOSE POND ROAD #B3 Address: Address: City-St-Zip: JUNO BEACH, FL 33408 City-St-Zip: LAKE ARIEL, PA 18436

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: MICHAEL E. CHAPNICK, ESQ., ATTY/AGENT

RΑ

05/01/2009