

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03909

FILED
Feb 14, 2011
Secretary of State

Entity Name: LIONSGATE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1099 LIONSGATE LANE
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

1099 LIONSGATE LANE
GULF BREEZE, FL 32563

New Mailing Address:

FEI Number: 59-2543075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORBIN, CLARENCE
1071 LIONSGATE LN
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

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: PD
Name: HORNE, LARRY
Address: 1067 LIONSGATE LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: VD
Name: KONZELMANN, WILLIAM
Address: 1074 LIONSGATE LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: SD
Name: BULLINGTON, ANN
Address: 1141 LIONSGATE LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: TD
Name: CORBIN, CLARNECE
Address: 1071 LIONSGATE LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: D
Name: WILLS, JACKIE
Address: 3129 LINDEN AVENUE
City-St-Zip: GULF BREEZE, FL 32563

Title: D
Name: NELSON, JIM
Address: 1082 LIONSGATE LANE
City-St-Zip: GULF BREEZE, FL 32563

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: CLARENCE A CORBIN

TD

02/14/2011

Electronic Signature of Signing Officer or Director

Date