

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006578

FILED
Feb 10, 2009
Secretary of State

Entity Name: LA PRESERVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1212 E. BROWARD BLVD.
SUITE 300
FT LAUDERDALE, FL 33301

New Principal Place of Business:

1441 SW 20TH COURT
FT LAUDERDALE, FL 33315

Current Mailing Address:

P.O. BOX 350554
FORT LAUDERDALE, FL 33315

New Mailing Address:

P.O. BOX 350554
FORT LAUDERDALE, FL 33335

FEI Number: 20-4667102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLAZER & ASSOCIATES, P.A.
3113 STIRLING ROAD
SUITE 201
HOLLYWOOD, FL 33312 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: P () Delete
Name: WRIGHT, GLENN B JR
Address: 1212 E. BROWARD BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VP (X) Delete
Name: WRIGHT, PATRICIA K
Address: 1212 E. BROWARD BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: BKPR (X) Delete
Name: SEAVER, STEPHANIE
Address: 1311 SW 23RD STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: BOSCO, DEBRA
Address: 1441 SW 20TH COURT
City-St-Zip: FT. LAUDERDALE, FL 33315

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: DEBRA BOSCO

DIR

02/10/2009

Electronic Signature of Signing Officer or Director

_____ Date