

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008556

FILED
Apr 16, 2009
Secretary of State

Entity Name: BEAR LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2265 LEE ROAD
SUITE 117
WINTER PARK, FL 32789

New Principal Place of Business:

2755 BORDER LAKE ROAD
SUITE 101
APOPKA, FL 32703

Current Mailing Address:

PO BOX 608863
ORLANDO, FL 32860

New Mailing Address:

2755 BORDER LAKE ROAD
SUITE 101
APOPKA, FL 32703

FEI Number: 20-2618296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARMENING, JOSHUA W
2265 LEE ROAD
SUITE 117
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

KANAGA, MERIDYTHE
2755 BORDER LAKE ROAD
SUITE 101
APOPKA, FL 32703 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: MERIDYTHE KANAGA

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BOLANDER, NICHOL
Address: 5321 PEPPER BRUSH COVE
City-St-Zip: APOPKA, FL 32703

Title: DVP () Delete
Name: ROBINSON, KRISTY
Address: 5348 PEPPER BRUSH COVE
City-St-Zip: APOPKA, FL 32703

Title: DT () Delete
Name: HARMENING, JOSHUA W
Address: 2265 LEE ROAD SUITE 117
City-St-Zip: WINTER PARK, FL 32789

Title: DS (X) Delete
Name: DY, NICOLE
Address: 5329 PEPPER BRUSH COVE
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: TRETTER, RAYMOND
Address: 5381 PEPPER BRUSH COVE
City-St-Zip: APOPKA, FL 32703

Title: DP (X) Change () Addition
Name: ROBINSON, KRISTY
Address: 5348 PEPPER BRUSH COVE
City-St-Zip: APOPKA, FL 32703

Title: DVP (X) Change () Addition
Name: DY, NICOLE
Address: 5329 PEPPER BRUSH COVE
City-St-Zip: APOPKA, FL 32703

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: RAYMOND TRETTER

DST

04/16/2009

Electronic Signature of Signing Officer or Director

Date