

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05840

FILED
Feb 12, 2009
Secretary of State

Entity Name: PARK LAKE ASSOCIATION NUMBER THREE, INC.

Current Principal Place of Business:

2045 SAN MARCOS DR
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

2045 SAN MARCOS DR
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 59-2698696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TENAGLIA, RICHARD A
C/O CREATIVE ASSOCIATION SERV., INC.
2045 SAN MARCOS DR
WINTER HAVEN, FL 33880 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: MARCUM, CAROL J
Address: 2050 SAN MARCOS DRIVE #113
City-St-Zip: WINTER HAVEN, FL 33880

Title: PD () Delete
Name: BRANDRETH, CHARLES
Address: 2045 SAN MARCOS DR., #101
City-St-Zip: WINTER HAVEN, FL 33880

Title: SD () Delete
Name: JANAWICZ, JOHN P
Address: 2050 SAN MARCOS DRIVE SE #211
City-St-Zip: WINTER HAVEN, FL 33880

Title: S (X) Delete
Name: ELMORE, CATHERINE
Address: 2040 SAN MARCOS DRIVE SE # 203
City-St-Zip: WINTER HAVEN, FL 33880

Title: T (X) Delete
Name: BRADLEY, BOB
Address: 2049 SAN MARCOS DR SE # 127
City-St-Zip: WINTER HAVEN, FL 33880

Title: D (X) Delete
Name: MARCUM, CAROL J
Address: 2050 SAN MARCOS DRIVE # 113
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, STAN
Address: 55 3RD STREET NW
City-St-Zip: WINTER HAVEN, FL 33881

Title: S (X) Change () Addition
Name: ELMORE, CATHERINE
Address: 2040 AN MARCOS DR., #203
City-St-Zip: WINTER HAVEN, FL 33880

Title: T (X) Change () Addition
Name: BRADLEY, BOB
Address: 2615 KENNY LEE DRIVE
City-St-Zip: LIMA, OH 45808

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: STAN SMITH

P

02/12/2009

Electronic Signature of Signing Officer or Director

Date