

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000911

FILED
May 16, 2008
Secretary of State

Entity Name: LAKE MARY TOWNHOMES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8009 S ORANGE AVENUE
ORLANDO, FL 32809

New Principal Place of Business:

5955 TG LEE BLVD.
SUITE 300
ORLANDO, FL 32822

Current Mailing Address:

8009 S ORANGE AVENUE
ORLANDO, FL 32809

New Mailing Address:

5955 TG LEE BLVD.
SUITE 300
ORLANDO, FL 32822

FEI Number: 76-0822668 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:

LELAND MANAGEMENT
8009 S ORLANDO AVENUE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

LELAND MANAGEMENT
5955 TG LEE BLVD.
SUITE 300
ORLANDO, FL 32822 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: REBECCA FURLOW

05/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHANNON, LYNN
Address: 151 SOUTHHALL LANE, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: VD () Delete
Name: PIAZZA, KETICA
Address: 151 SOUTHHALL LANE, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: STD () Delete
Name: WRIGHT, MATTHEW
Address: 151 SOUTHHALL LANE, SUITE 200
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DIVJAK, DAN
Address: 151 SOUTHHALL LANE, SUITE 200
City-St-Zip: MAITLAND, FL 32751

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: RASMUSSEN, TODD
Address: 151 SOUTHHALL LANE, SUITE 200
City-St-Zip: MAITLAND, FL 32751

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: DAN DIVJAK

PD

05/16/2008

Electronic Signature of Signing Officer or Director

Date