## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006167

FILED May 15, 2008 Secretary of State

Entity Name: LAKE JULIANA ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8009 SOUTH ORANGE AVE. 5955 TG LEE BLVD. ORLANDO, FL 32809 SUITE 300

ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

8009 SOUTH ORANGE AVE. 5955 TG LEE BLVD. ORLANDO, FL 32809 SUITE 300 ORLANDO, FL 32822

FEI Number: 20-5049383 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: Name and Address of New Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DP ( ) Delete Title: DP (X) Change ( ) Addition

Name: MORSE, CINDY Name: PHILLIPS, MATT

Address: 120 FAIRWAY WOODS BLVD. Address: 2966 COMMERCE PARK DR STE 100

City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32819

Title: DV ( ) Delete Title: DV (X) Change ( ) Addition

Name: REINERT, JIM Name: MORSE, CINDY

Address: 120 FAIRWAY WOODS BLVD. Address: 2966 COMMERCE PARK DR STE 100

City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32819

Title: DST ( ) Delete Title: DST (X) Change ( ) Addition

Name: VIDRINE, ANDRE Name: VIDRINE, ANDRE

Address: 120 FAIRWAY WOODS BLVD. Address: 2966 COMMERCE PARK DR STE 100

City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32819

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: MATT PHILLIPS DP 05/15/2008