## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006173

Entity Name: LAKE LINDA CIRCLE CO-OP, INC.

FILED Jan 26, 2009 Secretary of State

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

2036 LAKE LINDA CIRCLE LUTZ, FL 33558

**Current Mailing Address: New Mailing Address:** 

2036 LAKE LINDA CIRCLE LUTZ, FL 33558

FEI Number: 20-5629429 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

OLESKI, RONALD 2013 LÁKE LINDA CIRCLE LUTZ, FL 33558

**OFFICERS AND DIRECTORS:** 

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

SEC () Change () Addition () Delete

KING, ELIZABETH Name: Name: 2051 LAKE LINDA CIRCLE Address: Address: LUTZ, FL 33558 City-St-Zip: City-St-Zip:

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

Name: LEVY, RICHARD Name: ZADANOFF, WALTER Address: 2110 LAKE LINDA CIRCLE Address: 2050 LAKE LINDA CIRCLE

City-St-Zip: LUTZ, FL 33558 City-St-Zip: LUTZ, FL 33558

Title: **TRES** () Delete Title: **TRES** (X) Change ( ) Addition BARKER JR, RAYMOND F Name: MCCALVEY, KENNETH G Name: 2109 LAKE LINDA CIRCLE Address: Address: 2004 LAKE LINDA CIRCLE

City-St-Zip: LUTZ. FL 33558 City-St-Zip: LUTZ. FL 33558

() Change () Addition Title: Title: ( ) Delete

Name: BAILEY, LISA J Name: 2008 LAKE LINDA CIRCLE Address: Address: City-St-Zip: LUTZ, FL 33558 City-St-Zip:

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

HIGGINS, SHIRLEY LAVALLEY, FRANCIS Name: Name: 2012 LAKE LINDA CIRCLE 2028 LAKE LINDA CIRCLE Address: Address:

LUTZ, FL 33558 City-St-Zip: LUTZ, FL 33558 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: KENNETH G MCCALVEY **TRES** 01/26/2009