

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000011258

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** LYNWOOD AT SOUTHMEADOW CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

107 N LINE DR  
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

107 N LINE DR  
APOPKA, FL 32703

**New Mailing Address:**

107 N LINE DR  
APOPKA, FL 32703 US

**FEI Number:** 51-0567610

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUTHERLAND, THERESA D  
107 N LINE DR  
APOPKA, FL 32703 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: PD  
Name: AFONSO-CABAN, XIOMARA  
Address: 13418 SOUTHMEADOW DR.  
City-St-Zip: ORLANDO, FL 32824 US

Title: TD  
Name: MASHAK, ABDELAZIZ  
Address: 13440 TEA ROSE WAY  
City-St-Zip: ORLANDO, FL 32824 US

I hereby 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 all other like empowered.

**SIGNATURE:** XIOMARA AFONSO-CABAN

PD

04/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date