

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Sep 22, 2009  
Secretary of State**

DOCUMENT# N08000006952

**Entity Name:** LAKESHORE RESERVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6649 WESTWOOD BLVD.  
C/O MARRIOTT RESORTS HOSPITALITY CORP.  
ORLANDO, FL 328216090

**New Principal Place of Business:**

**Current Mailing Address:**

6649 WESTWOOD BLVD.  
C/O MARRIOTT RESORTS HOSPITALITY CORP.  
ORLANDO, FL 328216090

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **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:**

PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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:**

Title: DP                      ( ) Delete  
Name: LEANDRO, SANDY  
Address: 6649 WESTWOOD BLVD.  
City-St-Zip: ORLANDO, FL 328216090

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

Title: DV                      ( ) Delete  
Name: MCALLISTER, JENNIFER  
Address: 6649 WESTWOOD BLVD.  
City-St-Zip: ORLANDO, FL 328216090

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

Title: DST                      ( ) Delete  
Name: BRADFORD, BRAD  
Address: 6649 WESTWOOD BLVD.  
City-St-Zip: ORLANDO, FL 328216090

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: LANA CULLUM

SPS

09/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date