

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09281

FILED
Jan 18, 2011
Secretary of State

Entity Name: LAKEBRIDGE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

7124 NORTH NOB HILL ROAD
TAMARAC, FL 33321 US

New Principal Place of Business:

C/O CONSOLIDATED COMMUNITY MANAGEMENT
7124 N. NOB HILL ROAD
TAMARAC, FL 33321 US

Current Mailing Address:

7124 NORTH NOB HILL ROAD
TAMARAC, FL 33321 US

New Mailing Address:

C/O CONSOLIDATED COMMUNITY MANAGEMENT
7124 N. NOB HILL ROAD
TAMARAC, FL 33321 US

FEI Number: 59-2609967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALANCY, STEVEN S
311 SE 13TH STREET
FORT LAUDERDALE, FL 33316 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: VP
Name: LEWIS, CHARLES
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321 US

Title: SD
Name: VALINZO, PRINCESS
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321 US

Title: TD
Name: LINK, ALICE
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321 US

Title: PD
Name: TRENT, CARMEN
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321 US

Title: D
Name: GOVE, ANNE
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321 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: CARMEN TRENT

PD

01/18/2011

Electronic Signature of Signing Officer or Director

Date