

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43753

FILED  
Apr 29, 2007  
Secretary of State

Entity Name: LAKESHORE GARDENS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

431 WAVERLY ROAD  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

431 WAVERLY ROAD  
TALLAHASSEE, FL 32312

**New Mailing Address:**

FEI Number: 59-3194681      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ISAACS, DAN  
431 WAVERLY ROAD  
TALLAHASSEE, FL 32312      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      ( ) Delete  
Name: SNYDER, KRISTEN  
Address: 3271 JOHN HANCOCK DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: DVP      ( ) Delete  
Name: TORRES, WILLIAM  
Address: 329 DREADNAUGHT  
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD      ( ) Delete  
Name: ROE, GLORIA  
Address: 3255 JOHN HANCOCK DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: D      ( ) Delete  
Name: MYERS, SEAN  
Address: 3255 JOHN HANCOCK DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: PT      ( ) Delete  
Name: CATALANO, ROSANNA  
Address: 180 IVERNIA LOOP  
City-St-Zip: TALLAHASSEE, FL 32312

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: DACP      (X) Change ( ) Addition  
Name: MYERS, SEAN  
Address: 3255 JOHN HANCOCK DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: PT      (X) Change ( ) Addition  
Name: MCDOANALD, BRUCE  
Address: 354 DREADNAUGHT  
City-St-Zip: TALLAHASSEE, FL 32312

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: KRISTEN SNYDER

DP

04/29/2007

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

\_\_\_\_\_  
Date