

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43753

FILED  
Apr 02, 2012  
Secretary of State

**Entity Name:** LAKESHORE GARDENS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2121 KILLARNEY WAY  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 11143  
TALLAHASSEE, FL 32302

**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:**

FLORIDA ASSOCIATION & PROPERTY MANAGEMENT  
2121 KILLARNEY WAY  
TALLAHASSEE, FL 32309 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: DP  
Name: SNYDER, KRISTEN  
Address: 3271 JOHN HANCOCK DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: DS  
Name: BELLAVANCE, ANGELA  
Address: POST OFFICE BOX 11143  
City-St-Zip: TALLAHASSEE, FL 32302

Title: D  
Name: GRAVES, TIFFANY  
Address: 335 DREADNAUGHT COURT  
City-St-Zip: TALLAHASSEE, FL 32312

Title: DT  
Name: SCHLAUDRAFF, MARK  
Address: 3270 JOHN HANCOCK DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

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: JOANIE TROTMAN

RA

04/02/2012

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

\_\_\_\_\_  
Date