

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000111

FILED
Jan 14, 2009
Secretary of State

Entity Name: LAKE CAWOOD ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5401 S KIRKMAN
STE 450
ORLANDO, FL 32819

New Principal Place of Business:

5401 S KIRKMAN ROAD
STE 450
ORLANDO, FL 32819

Current Mailing Address:

5401 S KIRKMAN
STE 450
ORLANDO, FL 32819

New Mailing Address:

5401 S KIRKMAN ROAD
STE 450
ORLANDO, FL 32819

FEI Number: 59-3418333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT PROFESSIONALS INC
5401 KIRKMAN RD STE 450
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT PROFESSIONALS INC
5401 KIRKMAN RD
STE 450
ORLANDO, FL 32819 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: KAREN SFARA

01/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: IRVING, SEAN
Address: 13629 LAKE CAWOOD DR
City-St-Zip: WINDERMERE, FL 34786

Title: TD () Delete
Name: SCHREIBER, VINCENT
Address: 13701 LAKE CAWOOD DR
City-St-Zip: WINDERMERE, FL 34786

Title: PS () Delete
Name: WILLIAMS, RHETT
Address: 13733 LAKE CAWOOD DR.
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: IRVINE, SEAN
Address: 13629 LAKE CAWOOD DR
City-St-Zip: WINDERMERE, FL 34786

Title: VP (X) Change () Addition
Name: SCHREIBER, VINCENT
Address: 13701 LAKE CAWOOD DR
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Change () Addition
Name: WILLIAMS, RHETT
Address: 13733 LAKE CAWOOD DR.
City-St-Zip: WINDERMERE, FL 34786

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: SEAN IRVINE

P

01/14/2009

Electronic Signature of Signing Officer or Director

Date