## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000004586

FILED Jan 28, 2009 Secretary of State

Entity Name: ESTATES AT LAKE VIEW PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

409 E COLLEGE AVE RUSKIN, FL 33570

Current Mailing Address: New Mailing Address:

PO BOX 1058 RUSKIN, FL 33575

FEI Number: 59-3537503 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WILSON, LOU E TRIMMER, KATHY
409 E COLLEGE AVE
RUSKIN, FL 33570 US RUSKIN, FL 33570 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: KATHY TRIMMER 01/28/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 VP
 (X) Change ( ) Addition

 Name:
 BURNS, JOHN
 Name:
 BURNS, JOHN

 Address:
 1133 SIGNATURE DRIVE
 Address:
 1133 SIGNATURE DRIVE

 City-St-Zip:
 SUN CITY CENTER, FL 33573
 SUN CITY CENTER, FL 33573

Title: D/T ( ) Delete Title: T (X) Change ( ) Addition

Name:WALTER, GERALDName:HARTER, JARROLDAddress:1104 SIGNATURE DRIVEAddress:1104 SIGNATURE DRIVECity-St-Zip:SUN CITY CENTER, FL 33573City-St-Zip:SUN CITY CENTER, FL 33573

Title: DS () Delete Title: () Change () Addition

 Name:
 GUERTIN, ED
 Name:

 Address:
 1106 SIGNATURE DR
 Address:

 City-St-Zip:
 SUN CITY CENTER, FL 33573
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KEY, JIM
 Name:

 Address:
 1132 SIGNATURE DR.
 Address:

 City-St-Zip:
 SUN CITY CENTER, FL 33573
 City-St-Zip:

Title: D ( ) Delete Title: P (X) Change ( ) Addition

Name:MEZEY, ROBERTName:MEZEY, ROBERTAddress:1123 SIGNATURE DRAddress:1123 SIGNATURE DRCity-St-Zip:SUN CITY CENTER, FL 33573City-St-Zip:SUN CITY CENTER, FL 33573

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: ROBERT MEZEY P 01/28/2009