

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003249

FILED
Apr 27, 2009
Secretary of State

Entity Name: LAKE JESSAMINE ESTATES PHASE 2 HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

75 GATLIN AVE, STE A
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

75 GATLIN AVE, STE A
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 01-0733844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARREN, NANCY
75 GATLIN AVE, STE A
ORLANDO, FL 32806 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: P () Delete
Name: BEARDSLEE, RONALD
Address: 162 MARSEILLE OAKS DRIVE
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: CORDELLA, HENRY
Address: 5184 LAVAL DR
City-St-Zip: ORLANDO, FL 32839

Title: S () Delete
Name: CARTER, MONA
Address: 238 VERZON COURT
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: CLEMENTZ, JOHN
Address: 232 VERZON CT
City-St-Zip: ORLANDO, FL 32839

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BEARDSLEE, RONALD
Address: 162 MARSEILLE OAKS DRIVE
City-St-Zip: ORLANDO, FL 32839

Title: D (X) Change () Addition
Name: BEAUCHAMP, NATHAN
Address: 5019 TOULON DR.
City-St-Zip: ORLANDO, FL 32839

Title: VP (X) Change () Addition
Name: CARTER, MONA
Address: 238 VERZON COURT
City-St-Zip: ORLANDO, FL 32839

Title: S (X) Change () Addition
Name: CLEMENTZ, JOHN
Address: 232 VERZON CT
City-St-Zip: ORLANDO, FL 32839

Title: T () Change (X) Addition
Name: DONAWA, STEPHILL
Address: 5184 LAVAL DR.
City-St-Zip: ORLANDO, FL 32839

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: NANCY WARREN

AGEN

04/27/2009

Electronic Signature of Signing Officer or Director

Date