

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766514

FILED  
Jun 24, 2009  
Secretary of State

**Entity Name:** LAKE RIDGE VILLAGE CLUB ASSOCIATION, INC.

**Current Principal Place of Business:**

10630 LARISSA STREET  
ORLANDO, FL 32821

**New Principal Place of Business:**

**Current Mailing Address:**

10630 LARISSA STREET  
ORLANDO, FL 32821

**New Mailing Address:**

**FEI Number:** 59-2494950      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SHIMER, KATHRYN  
4730 LARCHMONT COURT  
ORLANDO, FL 32821 US

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

SHIMER, KATHRYN  
4750 LARCHMONT COURT  
ORLANDO, FL 32821 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: \_\_\_\_\_

06/24/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: SHIMER, KATHRYN  
Address: 4750 LARCHMONT CT  
City-St-Zip: ORLANDO, FL 32821

Title: SD ( ) Delete  
Name: MCGUIRK, MARY  
Address: 4719 LARCHMONT COURT  
City-St-Zip: ORLANDO, FL 32821

Title: PD ( ) Delete  
Name: SMOKE, LEONARD  
Address: 10637 LAZY LAKE DRIVE  
City-St-Zip: ORLANDO, FL 32821

Title: VD ( ) Delete  
Name: GIRRLT, JEFFREY  
Address: 4902 LINDSAY CT  
City-St-Zip: ORLANDO, FL 32821

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

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: KATHRYN E. SHIMER

TD

06/24/2009

Electronic Signature of Signing Officer or Director

Date