

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Sep 22, 2009
Secretary of State**

DOCUMENT# N08000006952

Entity Name: LAKESHORE RESERVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6649 WESTWOOD BLVD.
C/O MARRIOTT RESORTS HOSPITALITY CORP.
ORLANDO, FL 328216090

New Principal Place of Business:

Current Mailing Address:

6649 WESTWOOD BLVD.
C/O MARRIOTT RESORTS HOSPITALITY CORP.
ORLANDO, FL 328216090

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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 () Delete
Name: LEANDRO, SANDY
Address: 6649 WESTWOOD BLVD.
City-St-Zip: ORLANDO, FL 328216090

Title: DV () Delete
Name: MCALLISTER, JENNIFER
Address: 6649 WESTWOOD BLVD.
City-St-Zip: ORLANDO, FL 328216090

Title: DST () Delete
Name: BRADFORD, BRAD
Address: 6649 WESTWOOD BLVD.
City-St-Zip: ORLANDO, FL 328216090

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:

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: LANA CULLUM

Electronic Signature of Signing Officer or Director

SPS

09/22/2009

Date