

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004744

FILED  
Mar 10, 2010  
Secretary of State

**Entity Name:** LAKE ROSE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 W STATE ROAD 434  
STE 5000  
LONGWOOD, FL 32779 US

**New Principal Place of Business:**

**Current Mailing Address:**

2180 W STATE ROAD 434  
STE 5000  
LONGWOOD, FL 32779 US

**New Mailing Address:**

**FEI Number:** 59-3440308

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 32779 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: VPD  
Name: WEIRICK, JANICE  
Address: 913 AMERICAN ROSE PKWY  
City-St-Zip: ORLANDO, FL 32825

Title: D  
Name: FRANK, MORGAN  
Address: 1105 AMERICAN ROSE PKWY  
City-St-Zip: ORLANDO, FL 32825

Title: PD  
Name: BARNES, EMILY  
Address: 906 AMERICAN ROSE PKWY  
City-St-Zip: ORLANDO, FL 32825

Title: TSD  
Name: HERNANDEZ, ANNETTE  
Address: 900 AMERICAN ROSE PKWY  
City-St-Zip: ORLANDO, FL 32825

I hereby 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 all other like empowered.

SIGNATURE: EMILY BARNES

PD

03/10/2010

Electronic Signature of Signing Officer or Director

Date