2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 629002

FILED Jan 14, 2009 Secretary of State

Entity Name: LANAIR PARK IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	IRIETTA COUR A, FL 33462	Т			
Current Mailing Address:		New Mailing Addre	New Mailing Address:		
	IRIETTA COUR a, FL 33462	Т			
FEI Number	: 65-0164609	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
2454 HẾN	CATHERINE IRIETTA CT. A, FL 33462 I	JS			
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATU	RE:				
SIGNATU		c Signature of Registered Ag	ent	Date	
	Electroni	ic Signature of Registered Ag Trust Fund Contribution ().	ent	Date	
Election Ca	Electroni	Trust Fund Contribution ().			
Election Ca OFFICER Title: Name: Address:	Electroni mpaign Financing S AND DIRECT	Trust Fund Contribution (). FORS: Delete HARD			
Election Ca OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electroni mpaign Financing S AND DIRECT VP () CARLSON, RICH 2377 CRAWFOR LANTANA, FL	Trust Fund Contribution (). FORS: Delete HARD RD CT Delete PH W.,	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTORS	
Election Ca	Electronic	Trust Fund Contribution (). FORS: Delete HARD RD CT Delete PH W., PA COURT Delete TH,	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH W WOOLF TRES 01/14/2009