

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 704152					
1. Entity Name LAKE ROSALIE ESTATES PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 10835 W BEACH PKWY LAKE WALES, FL 33898 US			Mailing Address 10835 W BEACH PKWY LAKE WALES, FL 33898 US		
10387 Fort Gardner Rd. Lake Wales, FL 33898					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01052009 Chg-NP CR2E037 (11/08)	
City & State		City & State		4. FEI Number 70-4152632	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPOONER, MARILYN 10835 W BEACH PKWY LAKE WALES, FL 33898			7. Name and Address of New Registered Agent Name: Curphey Dolores Street Address (P.O. Box Number is Not Acceptable): 10387 Fort Gardner Rd. City: Lake Wales FL Zip Code: 33898		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <u>Dolores Curphey</u> 1/6/09 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2009		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD	NAME QUILLER, HERB	<input type="checkbox"/> Delete	TITLE PD	NAME Ron Bond	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3304 CITRUS COURT	LAKE WALES, FL 33898		STREET ADDRESS 11012 W. Beach Parkway	LAKE WALES FL 33898	
CITY-ST-ZIP	LAKE WALES, FL 33898		CITY-ST-ZIP	LAKE WALES FL 33898	
TITLE VPD	NAME MONROE, ALBERT	<input type="checkbox"/> Delete	TITLE VPD	NAME Lila Clifton	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10820 W BEACH PKWY	LAKE WALES, FL 33898		STREET ADDRESS 3331 ROSALIE BLVD.	LAKE WALES FL 33898	
CITY-ST-ZIP	LAKE WALES, FL 33898		CITY-ST-ZIP	LAKE WALES FL 33898	
TITLE RSD	NAME HUGHES, GLENNA	<input type="checkbox"/> Delete	TITLE RSD	NAME Janet Gatto	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10742 N MARINA PKWY	LAKE WALES, FL 33898		STREET ADDRESS 3355 Kentucky	LAKE WALES FL 33898	
CITY-ST-ZIP	LAKE WALES, FL 33898		CITY-ST-ZIP	LAKE WALES FL 33898	
TITLE TD	NAME SPOONER, MARILYN	<input type="checkbox"/> Delete	TITLE TD	NAME Dolores Curphey	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10835 W BEACH PKWY	LAKE WALES, FL 33898		STREET ADDRESS 10387 Fort Gardner Rd.	LAKE WALES FL 33898	
CITY-ST-ZIP	LAKE WALES, FL 33898		CITY-ST-ZIP	LAKE WALES FL 33898	
TITLE CSD	NAME GATTO, JANET	<input type="checkbox"/> Delete	TITLE CSD	NAME Vian Stabonau	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3366 KENTUCKY	LAKE WALES, FL 33898		STREET ADDRESS 3495 Amelia Dr	LAKE WALES FL 33898	
CITY-ST-ZIP	LAKE WALES, FL 33898		CITY-ST-ZIP	LAKE WALES FL 33898	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
500141492935 01/20/09--01057--012 **\$1.25					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Dolores Curphey</u> 1/6/09 862-696 2627 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					