2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# 707321

Entity Name: LAKE HARNEY WATER ASSOCIATION INC

Current Principal Place of Business:

STATE ROAD #46
P O BOX 1182
GENEVA, FL 32732 US

New Principal Place of Business:

4205 LAKE HARNEY CIRCLE
GENEVA, FL 32732 US

Current Mailing Address:

STATE ROAD #46
P O BOX 1182
GENEVA, FL 32732 US

New Mailing Address:

PO BOX 1182
GENEVA, FL 32732 US

FEI Number: 59-1090885 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCNICOL, ROBERT G
4205 LAKE HARNEY CIRCLE
GENEVA, FL 32732 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: P ( ) Delete
Name: MCNICOL, ROBERT G
Address: 4205 LAKE HARNEY CIRCLE
City-St-Zip: GENEVA, FL 32732

Title: VP ( ) Delete
Name: ATWEK, JIM
Address: 423 WHITECOMB DR
City-St-Zip: GENEVA, FL 32732

Title: T ( ) Delete
Name: HUGHES, KEVIN
Address: 4180 LAKE HARNEY CIRCLE
City-St-Zip: GENEVA, FL 32732

Title: S ( ) Delete
Name: MARMO, MARILYN
Address: 3880 E. S.R. 46
City-St-Zip: GENEVA, FL 32732

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: ATWELL, JIM
Address: 423 WHITECOMB DR
City-St-Zip: GENEVA, FL 32732

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: ROBERT MCNICOLE PRES 01/16/2009
Electronic Signature of Signing Officer or Director — Date