

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 09, 2009
Secretary of State

DOCUMENT# 708572

Entity Name: LAKE COLONY APTS, ONE, INC.**Current Principal Place of Business:**ASSOCIATED PROPERTY MGMT.
1928 LAKE WORTH RD.
LAKE WORTH, FL 33461**New Principal Place of Business:****Current Mailing Address:**ASSOCIATED PROPERTY MGMT.
1928 LAKE WORTH RD.
LAKE WORTH, FL 33461**New Mailing Address:****FEI Number:** 59-1112729**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DICKER, EDWARD ESQ
1818 AUSTRALIAN AVE. SOUTH
SUITE 400
WEST PALM BEACH, FL 33409 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: ANDERSON, RICHARD P
Address: P.O. BOX 188
City-St-Zip: THREELAKES, WI 54562**Title:** V () Delete
Name: DIRSCHEL, RICHARD V
Address: 2520 KNOB HILL DR
City-St-Zip: DUBUQUE, IA 52003**Title:** VTD () Delete
Name: SCHWEITZER, DORIS VTD
Address: 100 DOOLEN CT #113-A
City-St-Zip: NORTH PALM BEACH, FL 33408**Title:** T () Delete
Name: LONERGAN, KATHLEEN T
Address: 7177 CENTENNIAL TR
City-St-Zip: ROCKFORD, IL 61107**Title:** TD () Delete
Name: STEARNS, RONALD TD
Address: DURANT RD-PO BOX 249
City-St-Zip: BLUE MOUNTAIN LAKE, NY 12812**Title:** S () Delete
Name: ELDRED, ANNE S
Address: 100 DOOLEN CT #109-A
City-St-Zip: NORTH PALM BEACH, FL 33408**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: ANDERSON, RICHARD
Address: P.O. BOX 188
City-St-Zip: THREELAKES, WI 54562**Title:** V (X) Change () Addition
Name: DIRSCHEL, RICHARD
Address: 2520 KNOB HILL DR
City-St-Zip: DUBUQUE, IA 52003**Title:** VTD (X) Change () Addition
Name: SCHWEITZER, DORIS
Address: 100 DOOLEN CT #113-A
City-St-Zip: NORTH PALM BEACH, FL 33408**Title:** T (X) Change () Addition
Name: LONERGAN, KATHLEEN
Address: 7177 CENTENNIAL TR
City-St-Zip: ROCKFORD, IL 61107**Title:** TD (X) Change () Addition
Name: STEARNS, ROLAND
Address: 101 DOOLEN CT. #206-B
City-St-Zip: NORTH PALM BEACH, FL 33408**Title:** S (X) Change () Addition
Name: ELDRED, ANNE
Address: 100 DOOLEN CT #109-A
City-St-Zip: NORTH PALM BEACH, FL 33408

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: JOHN MATH, APM

AGT

12/09/2009

Electronic Signature of Signing Officer or Director

Date