

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709146

FILED
Apr 16, 2008
Secretary of State

Entity Name: LAKE PANASOFFKEE WATER ASSOCIATION, INC.

Current Principal Place of Business:

1165 CR 465
LAKE PANASOFFKEE, FL 335389719 US

New Principal Place of Business:

Current Mailing Address:

1165 CR 465
LAKE PANASOFFKEE, FL 335389719 US

New Mailing Address:

FEI Number: 59-1236062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERRITT, JOEL
2272 CR436E
LAKE PANASOFFKEE, FL 33538 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: D () Delete
Name: MARTIN, DON
Address: 2444 CR401A
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: DST () Delete
Name: ELLIOTT, GENE
Address: 1061 CR452
City-St-Zip: LK. PANASOFFKEE, FL 33538

Title: DP () Delete
Name: MERRITT, JOEL
Address: 2272 CR436E
City-St-Zip: LK. PANASOFFKEE, FL 33538

Title: D () Delete
Name: NORTON, RODGER
Address: 1957 CR439C
City-St-Zip: LK. PANASOFFKEE, FL 33538

Title: DVP () Delete
Name: WEBER, MARK
Address: 4069 CR400
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: D () Delete
Name: NORRIS, ROBERT
Address: 1070 CR 439
City-St-Zip: LAKE PANASOFFKEE, FL 33538

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JOEL MERRITT

DP

04/16/2008

Electronic Signature of Signing Officer or Director

Date