

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719703

FILED
Feb 26, 2009
Secretary of State

Entity Name: LAKE LAWN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% 1830 BRANTLEY RD., #B4
FORT MYERS, FL 33907

New Principal Place of Business:

% 1830 BRANTLEY RD., #CH1
FORT MYERS, FL 33907

Current Mailing Address:

% 1830 BRANTLEY RD., #B4
FORT MYERS, FL 33907

New Mailing Address:

% 1830 BRANTLEY RD., #CH1
FORT MYERS, FL 33907

FEI Number: 59-1484853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOWERS, MIKE
2040 VIRGINIA AVE
FORT MYERS, FL 33901 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: VPD () Delete
Name: KINCAID, DOYLE
Address: 1830 BRANTLEY RD
City-St-Zip: FORT MYERS, FL 33907

Title: P () Delete
Name: BRANOCK, BARBARA
Address: 1830 BRANTLEY RD # G-2
City-St-Zip: FORT MYERS, FL 33907

Title: SD () Delete
Name: PIETRAFESA, CONNIE
Address: 1830 BRANTLEY RD #K8
City-St-Zip: FORT MYERS, FL 33907

Title: TD () Delete
Name: ANDERSON, SHARON
Address: 1830 BRANTLEY RD #G3
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: SMITH, DOROTHY
Address: 1830 BRANTLEY RD #H-3
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: JARMUS, MARION
Address: 1830 BRANTLEY RD #C6
City-St-Zip: FORT MYERS, FL 33907

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: BARBARA BRANOCK

P

02/26/2009

Electronic Signature of Signing Officer or Director

_____ Date