

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725087

FILED  
Feb 11, 2010  
Secretary of State

**Entity Name:** INTERLACHEN LAKES LANDOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

217 KENNEDY AV.  
INTERLACHEN, FL 32148

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 292  
INTERLACHEN, FL 32148

**New Mailing Address:**

**FEI Number:** 59-1543145

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WHITEHILL, LINDA  
403 FRANKLIN ST  
INTERLACHEN, FL 32148 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: PD  
Name: WHITEHILL, LINDA  
Address: 402 FRANKLIN ST  
City-St-Zip: INTERLACHEN, FL 32148

Title: VPD  
Name: BLUMENBERG, HAROLD  
Address: 129 MILTON AV  
City-St-Zip: INTERLACHEN, FL 32148

Title: TD  
Name: GILMORE, LOWELL  
Address: 304 DAWN AVE  
City-St-Zip: INTERLACHEN, FL

Title: SD  
Name: YUNGWIRTH, BONNIE  
Address: 304 DAWN AV  
City-St-Zip: INTERLACHEN, FL 32148

Title: D  
Name: CHADSEY, CHARLES  
Address: 1083 OLD GAINSVILLE HWY  
City-St-Zip: INTERLACHEN, FL 32148

Title: D  
Name: PRESTON, ROGER  
Address: 106 HELEN AV  
City-St-Zip: INTERLACHEN, FL 32148

I hereby 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 all other like empowered.

SIGNATURE: LINDA WHITEHILL

PD

02/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date