

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729673

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** LAKE TALQUIN HEIGHTS HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

18035 RAKESTRAW DR.  
TALLAHASSEE, FL 32310

**New Principal Place of Business:**

**Current Mailing Address:**

18035 RAKESTRAW DR.  
TALLAHASSEE, FL 32310

**New Mailing Address:**

**FEI Number:** 59-3435545

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHITTENDEN, ANN  
18035 RAKESTRAW DRIVE  
TALLAHASSEE, FL 32310 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,P  
Name: SLOCUMB, LARRY  
Address: 2143 OSCAR HARVEY RD.  
City-St-Zip: TALLAHASSEE, FL 32310

Title: D  
Name: CARR, DOROTHY  
Address: 2071 OSCAR HARVEY DRIVE  
City-St-Zip: TALLAHASSEE, FL 32310

Title: D,VP  
Name: PORTER, DAVID  
Address: 18070 LANDES CT  
City-St-Zip: TALLAHASSEE, FL 32310

Title: S/T  
Name: CARR, DIANE M  
Address: 987 RIVERVIEW TRAIL  
City-St-Zip: TALLAHASSEE, FL 32310

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: DIANE M.CARR

S/T

03/31/2010

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

\_\_\_\_\_  
Date