2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#735150

FILED Mar 11, 2009 Secretary of State

Entity Name: LAKE YVETTE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 96 RAYMOND RD HAVANA, FL 32333 **Current Mailing Address: New Mailing Address:** 96 RAYMOND RD HAVANA, FL 32333 FEI Number: 59-2951570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: YERKES, JOHN H YERKES, JOHN H PRES 97 HANS COURT 97 HANS COURT HAVANA, FL 32333 US HAVANA, FL 32333 US 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: JOHN H. YERKES 03/11/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BLANTON, CHANTAL Name: Name: 466 RAYMOND RD Address: Address: City-St-Zip: HAVANA, FL 32333 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: YERKES, JOHN H Name: Address: 97 HANS CT Address: City-St-Zip: HAVANA, FL 32333 City-St-Zip: Title: () Delete Title: () Change () Addition MORNINGSTAR, DEBORAH Name: Name: 112 BLUE HERON POINT Address: Address: City-St-Zip: HAVANA, FL 32333 City-St-Zip: Title: () Delete Title: () Change () Addition JONES, KENNETH B Name: Name: 410 CHRISTIAN LANE Address: Address: City-St-Zip: HAVANA, FL 32333 City-St-Zip: Title: Title: () Delete () Change () Addition RYAN, MARIANNE Name: Name: 405 SHELINE DRIVE Address: Address: City-St-Zip: HAVANA, FL 32333 City-St-Zip: Title: () Delete Title: (X) Change () Addition TRANCHAND, DAVID BENEDICKS, WILLIAM Name: Name: Address: 240 ROZENA LOOP Address: 28 BLUE HERON POINT HAVANA, FL 32333 HAVANA, FL 32333 City-St-Zip: 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: JOHN H. YERKES PRES 03/11/2009