

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735491

FILED
Apr 29, 2009
Secretary of State

Entity Name: PORT LABELLE RANCHETTES PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

PORT LABELLE
LABELLE, FL 33935 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2031
LABELLE, FL 33975 US

New Mailing Address:

FEI Number: 65-0030332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNCH, DONALD J JR
3013 E BRIARWOOD CIRCLE
LABELLE, FL 33935 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: BASQUIN, DAVID A
Address: 62190 FRONTIER CIRCLE
City-St-Zip: LABELLE, FL 33935 US

Title: VD () Delete
Name: PENN, DIANE K
Address: 62560 FRONTIER CIRCLE
City-St-Zip: LABELLE, FL 33935 US

Title: PD () Delete
Name: MUNCH, DONALD J JR
Address: 3013 EAST BRIARWOOD CIRCLE
City-St-Zip: LABELLE, FL 33935 US

Title: TD () Delete
Name: DORN, L. HAROLD
Address: 62650 FRONTIER CIRCLE
City-St-Zip: LABELLE, FL 33935 US

Title: SD () Delete
Name: VAUGHN, LINDA
Address: 62640 FRONTIER CIRCLE
City-St-Zip: LABELLE, FL 33935 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BASQUIN, DAVID A
Address: 1460 FRONTIER CIRCLE
City-St-Zip: LABELLE, FL 33935 US

Title: VD (X) Change () Addition
Name: PENN, DIANE K
Address: 2251 FRONTIER CIRCLE
City-St-Zip: LABELLE, FL 33935 US

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

Title: TD (X) Change () Addition
Name: ARNDT, SALLIE
Address: 2965 FRONTIER CIRCLE
City-St-Zip: LABELLE, FL 33935 US

Title: SD (X) Change () Addition
Name: VAUGHN, LINDA
Address: 2475 FRONTIER CIRCLE
City-St-Zip: LABELLE, FL 33935 US

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: DONALD J MUNCH JR

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date