2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739625

FILED Jan 19, 2009 Secretary of State

Entity Name: LAKE PATRICK SUBDIVISION PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2754 N. PATRICK CIR WEST PALM BCH, FL 33406 **Current Mailing Address: New Mailing Address:** 2754 N. PATRICK CIR WEST PALM BCH, FL 33406 FEI Number: 59-1995329 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: WAGNER, VICTORIA L 2754 N. PÁTRICK CIR. WEST PALM BCH, FL 33406 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KAZEN, WENDY C Name: Name: 910 SOUTH PATRICK CIR. Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: Title: PD () Delete Title: () Change () Addition WAGNER, VICTORIA Name: Name: Address: 2754 NORTH PATRICK CIRCLE Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: Title: () Delete Title: () Change () Addition ROACH, RANDY Name: Name: 956 SOUTH PATRICK CIR. Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MATSON, ANNE Name: Address: 762 W. PATRICK CIR. Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: Title: () Delete Title: (X) Change () Addition LITSCHAUER, BARI LITSCHAUER, BARI Name: Name: 967 PATRICK DRIVE 967 PATRICK DRIVE Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33406 Title: () Delete Title: (X) Change () Addition FLOYD, CHARLA FLOYD, CHARLA Name: Name: Address: 984 SOUTH PATRICK CIRCLE Address: 984 SOUTH PATRICK CIRCLE WEST PALM BEACH, FL 33406 WEST PALM BEACH, FL 33406 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: VICTORIA WAGNER PRES 01/19/2009