

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740733

FILED  
Jan 29, 2009  
Secretary of State

Entity Name: LOCHMOOR CIVIC ASSOCIATION, INC.

## Current Principal Place of Business:

4260 PERTH COURT  
N FT MYERS, FL 33903 US

## New Principal Place of Business:

## Current Mailing Address:

4260 PERTH COURT  
N FT MYERS, FL 33903 US

## New Mailing Address:

FEI Number: 65-0032689

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NIGHTINGALE, BARBARA D  
4260 PERTH COURT  
NORTH FORT MYERS, FL 33903 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: SEDGWICK, DWIGHT  
Address: 4141 ORANGE GROVE BLVD.  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: T ( ) Delete  
Name: NIGHTINGALE, BARBARA D  
Address: 4260 PERTH COURT  
City-St-Zip: NORTH FT MYERS, FL 33903

Title: V ( ) Delete  
Name: MERSCH, MIKE  
Address: 4210 YARMOUTH COURT  
City-St-Zip: NORTH FORT MYERS, FL 33903

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change ( ) Addition  
Name: NIGHTINGALE, BARBARA D  
Address: 4260 PERTH COURT  
City-St-Zip: NORTH FT MYERS, FL 33903

Title: VD (X) Change ( ) Addition  
Name: MERSCH, MIKE  
Address: 4210 YARMOUTH COURT  
City-St-Zip: NORTH FORT MYERS, FL 33903

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: BARBARA D. NIGHTINGALE

TD

01/29/2009

Electronic Signature of Signing Officer or Director

Date