2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#741736

FILED Apr 11, 2009 Secretary of State

Entity Name: LAGO MAR COLONY PROTECTIVE ASSOCIATION, INC.

	Principal Place	of Business:	New Principal	Place of Business:	
	V 3RD STREET TION, FL 33325	US			
Current Mailing Address:			New Mailing A	New Mailing Address:	
13020 NW 3RD STREET PLANTATION, FL 33325 US			6400 N. ANDREWS AVENUE, SUITE 370 FT. LAUDERDALE, FL 33309		
FEI Numbe	r: 59-1959059	FEI Number Applied For ()	FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Add	ress of New Registered Agent:	
6400 N. A FT. LAUC	DERDALE, FL 3:	NUE, SUITE 370 3309 US	ourpose of changing its rec	istered office or registered agent, or both,	
	te of Florida.		an pass of an angling no reg	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SIGNATU		o Signature of Degistered Ag	nnt .	Data	
Electronic Signature of Registered Agent				Date	
OFFICER	RS AND DIRECT	ORS:	ADDITIONS/CF	IANGES TO OFFICERS AND DIRECTOR	
Title:	D ()	Delete	Title:	() Change () Addition	
Name: Address:	WEIDINGER, PE 130 NW 127 AV	E	Name: Address: City-St-Zip:	()Change ()Addition	
Name: Address: City-St-Zip: Title: Name: Address:	WEIDINGER, PE 130 NW 127 AV PLANTATION, F TD () WELLS, TIM 90 NW 128TH A	ETER E L 33325 Delete VE	Name: Address:	() Change () Addition	
Ittle: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	WEIDINGER, PE 130 NW 127 AV PLANTATION, F TD () WELLS, TIM 90 NW 128TH A PLANTATION, F SD () BAUER, CLIFFO 401 NW 131 AV	ETER E L 33325 Delete VE L 33325 Delete PRD ENUE	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: SD Name: Address: 1304		
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Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: Address:	WEIDINGER, PE 130 NW 127 AV PLANTATION, F TD () WELLS, TIM 90 NW 128TH A PLANTATION, F SD () BAUER, CLIFFO 401 NW 131 AV PLANTATION, F PD () ROSSI, ROBER 13020 NW 3 ST PLANTATION, F	ETER E L 33325 Delete VE L 33325 Delete PRD ENUE L 33325 Delete T L 33325 Delete OSEPH AVE	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: SD Name: PAT Address: 1304 City-St-Zip: PLAI Title: Name: Address:	() Change () Addition (X) Change () Addition FEN, MICHAEL NO NW 1 ST NTATION, FL 33325	

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: ROBERT J. ROSSI PD 04/11/2009