

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746217

FILED  
Apr 17, 2009  
Secretary of State

**Entity Name:** LAKE JACKSON CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

303 US 27 SOUTH  
SEBRING, FL 33870 US

**New Principal Place of Business:**

**Current Mailing Address:**

303 US 27 SOUTH  
SEBRING, FL 33870 US

**New Mailing Address:**

**FEI Number:** 59-1908426

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BUCHANAN, ALVIN  
2408 KAREN BLVD  
SEBRING, FL 33870 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: VP ( ) Delete  
Name: RAMOS, JAMES  
Address: 347 U.S. HWY 27 SOUTH  
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete  
Name: HALUCHA, DEANNE  
Address: 305 US HWY 27 SOUTH  
City-St-Zip: SEBRING, FL 33870

Title: P ( ) Delete  
Name: CHAPMAN, SHIRLEY  
Address: 309 US HWY 27 SOUTH  
City-St-Zip: SEBRING, FL 33870

Title: T ( ) Delete  
Name: BUCHANAN, MARIA L  
Address: 2408 KAREN BLVD  
City-St-Zip: SEBRING, FL 33870

Title: D (X) Delete  
Name: HARTLEY, MARIA  
Address: 325 US HWY 27 SOUTH  
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete  
Name: HURLBUTT, MARY  
Address: 4206 TALBOT STREET  
City-St-Zip: SEBRING, FL 33872

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ALVIN BUCHANAN

D

04/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date