## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 749747**

FILED Apr 30, 2009 Secretary of State

Entity Name: LAKE TYLER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1400 W HOLDEN AVE ORLANDO, FL 32839 **Current Mailing Address: New Mailing Address:** 1400 W HOLDEN AVE ORLANDO, FL 32839 FEI Number: 59-2068032 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: WARREN, DAWN 1400 W HOLDEN AVE ORLANDO, FL 32839 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: (X) Change ( ) Addition () Delete STEPHENSON, ROBERT STEPHENSON, ROBERT Name: Name: 1270 SHADOWMOSS CIRCLE Address: 1983 BRIDGEWATER DR Address: LAKE MARY, FL 32746 City-St-Zip: City-St-Zip: LAKE MARY, FL 32746 Title: ( ) Delete Title: () Change () Addition WELLS, ROBERT Name: Name: Address: 537 ARTESIA STREET Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: Title: (X) Change ( ) Addition () Delete EVANS, TIM Name: EVANS, TIM Name: 1412 C W HOLDEN AVE Address: Address: 1412C W HOLDEN AVE City-St-Zip: ORLANDO, FL 32839 City-St-Zip: ORLANDO, FL 32839 Title: ( ) Delete Title: (X) Change ( ) Addition Name: WARREN, DENNIS Name: WARREN, DENNIS Address: P.O. BOX 520220 Address: P.O. BOX 520220 City-St-Zip: LONGWOOD, FL 32752 City-St-Zip: LONGWOOD, FL 32752 Title: () Delete Title: () Change () Addition STEPHENSON, ROB SR Name: Name: 7292 POPHAM DR Address: Address: City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition RANNO, SHARON Name: Name: Address: Address: 1414A W. HOLDEN AVE ORLANDO, FL 32839 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: DENNIS WARREN P 04/30/2009