## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#752122**

FILED Apr 05, 2009 Secretary of State

Entity Name: LAURELWOOD ESTATES PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 702 GREENFIELD DR. PORT ORANGE, FL 32129 US **Current Mailing Address: New Mailing Address:** 702 GREENFIELD DR. PORT ORANGE, FL 32129 US FEI Number: 59-2873912 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: MURRAY, NEIL MANDL, VICKI L 743 LARADO DRIVE 753 INDIAN HILL DR PORT ORANGE, FL 32129 PORT ORANGE, FL 32129 US 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: VICKI L. MANDL 04/05/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GREANEY, ELAINE Name: Name: 703 CASPER AVE Address: Address: City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition GATES, CALLA Name: GATES, CALLA Name: Address: 110 DOVE AVE Address: 110 DOVE AVE City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: PORT ORANGE, FL 32129 Title: () Delete Title: (X) Change ( ) Addition HUGHES, CAROL MANDL, VICKI Name: Name: 754 INDIAN HILL DR. 743 LARADO DRIVE Address: Address: City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: PORT ORANGE, FL 32129 Title: Title: (X) Change ( ) Addition ( ) Delete Name: MURRAY, NEIL Name: DOW, ROBERT 753 INDIAN HILL DR Address: Address: 720 RAMPART DR. City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: PORT ORANGE, FL 32129 Title: () Delete Title: () Change () Addition BOLT, RICHARD Name: Name: 727 CASPER AVE Address: Address: City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition QUARLES, THOMAS J HYNSON, MARTIN B Name: Name: Address: 746 GREEN FIELD Address: 743 LARADO DR. PORT ORANGE, FL 32129 PORT ORANGE, FL 32129 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: VICKI L. MANDL SEC 04/05/2009