

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753041

FILED
Jan 28, 2009
Secretary of State

Entity Name: ACACIA LAKES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

409 E COLLEGE AVE
RUSKIN, FL 33570 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1058
RUSKIN, FL 33575 US

New Mailing Address:

FEI Number: 59-2025750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIMMER, KATHY
409 E COLLEGE AVENUE
RUSKIN, FL 33570 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: S () Delete
Name: DIMSDALE, GERALD
Address: 1002 DEL WEBB BLVD E
City-St-Zip: SUN CITY CENTER, FL 33572

Title: VP () Delete
Name: LENT, MARVIN
Address: 1108 E DEL WEBB BLVD
City-St-Zip: SUN CITY CENTER, FL 33573

Title: T () Delete
Name: AL, LATORRE
Address: 1317 BLUEWATER DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: P () Delete
Name: MARTHA, CHRISTENSEN
Address: 1310 BLUEWATER DR
City-St-Zip: SUN CITY CENTER, FL

Title: D () Delete
Name: DONOGHUE, ARLENE
Address: 1305 BLUEWATER DR
City-St-Zip: SUN CITY CENTER, FL 33572

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: LATORRE, AL
Address: 1317 BLUEWATER DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: P (X) Change () Addition
Name: CHRISTENSEN, MARTHA
Address: 1310 BLUEWATER DR
City-St-Zip: SUN CITY CENTER, FL

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: MARTHA CHRISTENSEN

P

01/28/2009

Electronic Signature of Signing Officer or Director

Date