# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 13, 2009**
**Secretary of State**

DOCUMENT# 754662

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

**Current Principal Place of Business:**

300 LAKE JUNE DR.
LAKE PLACID, FL 33852

**New Principal Place of Business:**

**Current Mailing Address:**

300 LAKE JUNE DR.
LAKE PLACID, FL 33852

**New Mailing Address:**

**FEI Number: 59-2282401** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

WUDTKE, LYNN
300 LAKE JUNE DRIVE
LAKE PLACID, FL 33852 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: | DST | ( ) Delete |
| Name: | WUDTKE, LYNN | |
| Address: | 300 LAKE JUNE DRIVE | |
| City-St-Zip: | LAKE PLACID, FL 33852 | |
| Title: | PD | ( ) Delete |
| Name: | DORN, TOM | |
| Address: | 231 E LANTANA RD APT 503 | |
| City-St-Zip: | LANATANA, FL 33462 | |
| Title: | VPD | ( ) Delete |
| Name: | HENNING, CARL | |
| Address: | 1700 NE 20TH ST. | |
| City-St-Zip: | FORT LAUDERDALE, FL 33305 | |

**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: | |

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: LYNN WUDTKE DST 01/13/2009

Electronic Signature of Signing Officer or Director — Date