2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2009
Secretary of State

DOCUMENT# 755144

Entity Name: LAKESHORE ESTATE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1452 SHOREWOOD DR
LAKELAND, FL 33803 US

New Principal Place of Business:

Current Mailing Address:

1452 SHOREWOOD DR
LAKELAND, FL 33803 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTIN, JONI
1452 SHOREWOOD DR
LAKELAND, FL 33803 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: SD ( ) Delete
Name: MARTIN, JONI
Address: 1452 SHOREWOOD DR
City-St-Zip: LAKELAND, FL 33803 US

Title: PD ( ) Delete
Name: FRANKENBERGER, PATTY
Address: 1436 SHOREWOOD DR
City-St-Zip: LAKELAND, FL 33803 US

Title: TD ( ) Delete
Name: HESTAND, GAIL
Address: 1492 SHOREWOOD CT
City-St-Zip: LAKELAND, FL 33803

Title: VD ( ) Delete
Name: YOUNG, CONNIE
Address: 1476 SHOREWOOD CT
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: BUTLER, MARILYN
Address: 1487 SHOREWOOD PL
City-St-Zip: LAKELAND, FL 33803 US

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

Title: VD (X) Change ( ) Addition
Name: BENTON, TERRY
Address: 1460 SHOREWOOD DR
City-St-Zip: LAKELAND, FL 33803

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: JONI MARTIN SD 03/12/2009

Electronic Signature of Signing Officer or Director — Date