

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758454

FILED
Apr 12, 2008
Secretary of State

Entity Name: NORTHLAKE VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10502 LAKE WILLIAMS DR.
ODESSA, FL 33556

New Principal Place of Business:

10502 LAKE WILLIAMS DRIVE
ODESSA, FL 33556

Current Mailing Address:

10502 LAKE WILLIAMS DR.
ODESSA, FL 33556

New Mailing Address:

10502 LAKE WILLIAMS DRIVE
ODESSA, FL 33556

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TARRAGO, LINDA H
10502 LAKE WILLIAMS DR.
ODESSA, FL 33556 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: PD () Delete
Name: BRAAKSMA, FRAN
Address: 10501 LAKE WILLIAMS DR
City-St-Zip: ODESSA, FL 33556

Title: VD () Delete
Name: WILKEY, TOM
Address: 10529 LAKE WILLIAMS DR
City-St-Zip: ODESSA, FL 33556

Title: SD () Delete
Name: GREENLEES, NANCY
Address: 10505 LAKE WILLIAMS DR
City-St-Zip: ODESSA, FL 33556

Title: TD () Delete
Name: TARRAGO, LINDA H
Address: 10502 LAKE WILLIAMS DR.
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LEONARD, KENNETH
Address: 10523 LAKE WILLIAMS DR
City-St-Zip: ODESSA, FL 33556

Title: VD (X) Change () Addition
Name: WILKEY, THOM
Address: 10529 LAKE WILLIAMS DR
City-St-Zip: ODESSA, FL 33556

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: LINDA TARRAGO

TD

04/12/2008

Electronic Signature of Signing Officer or Director

Date