2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#760002

FILED Mar 24, 2009 Secretary of State

Entity Name: LAKE HAVEN ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 11075 SCHAEFER LN. LAKE WALES, FL 33853 **Current Mailing Address: New Mailing Address:** 11075 SCHAEFER LN. LAKE WALES, FL 33898 FEI Number: 59-2515722 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: LANDAROM, VANDY 11075 SCHÄEFER LN. LAKE WALES, FL 33898 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition DARARATSAMY, THIP GATES, CHARLES Name: Name: 10710 SCHAEFER LANE Address: 10611 SCHAEFER LANE Address: City-St-Zip: LAKE WALES, FL 33898 City-St-Zip: LAKE WALES, FL 33898 Title: () Delete Title: (X) Change () Addition WENST, ROBERT Name: KETAVONG, METTA Name: Address: 11228 SCHAEFER LANE Address: 10577 SCHAEFER LANE City-St-Zip: LAKE WALES, FL 33898 City-St-Zip: LAKE WALES, FL 33898 Title: () Delete Title: () Change () Addition LANDAROM, VANDY Name: Name: 11075 SCHAEFER LANE Address: Address: City-St-Zip: LAKE WALES, FL 33898 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: WALRATH, JAMES O Name: Address: 10819 SCHAEFER LANE Address: City-St-Zip: LAKE WALES, FL 33898 City-St-Zip: Title: () Delete Title: () Change () Addition SOUTHAMMAVONG, MALAI I Name: Name: 11024 SCHAEFER LANE Address: Address: City-St-Zip: LAKE WALES, FL 33898 City-St-Zip: Title: () Delete Title: (X) Change () Addition SHEPPARD, JIM LAKE HENRY Name: Name: Address: 11278 SCHAEFER LANE Address: 10824 SCHAEFER LANE LAKE WALES, FL 33898 LAKE WALES, FL 33898 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: VANDY LADAROM TD 03/24/2009