2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764871 Mar 16, 2009
Secretary of State

Entity Name: LUCERNE LAKES GOLF COLONY CONDOMINIUM NO. 11 ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7268 GOLF COLONLY CT. LAKE WORTH, FL 33467

Current Mailing Address: New Mailing Address:

2450 JOG RD GREENACRES, FL 33467

FEI Number: 59-0227801 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:

DICKER, EDWARD

1818 AUSTRALIAN AVE S

1818 AUSTRALIAN AVE S

WEST PALM BEACH, FL 33409 US SUITE 400

WEST PALM BEACH, FL 33409 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: EDWARD DICKER 03/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FILED

Title: P () Delete Title: S (X) Change () Addition Name: FRAIELLI, JANET Name: FRAIELLI, JANET

Address: 7118 GOLF COLONY CT. 4202 Address: 7118 GOLF COLONY CT. 4202
City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467

Name: SULLIVAN, RUTH Name: PASSARELL, STANLEY

 Address:
 7118 GOLF COLONY #205
 Address:
 7118 GOLF COLONY COURT #103

 City-St-Zip:
 LAKE WORTH, FL 33467
 City-St-Zip:
 LAKE WORTH, FL 33467

Title: VP () Delete Title: () Change () Addition

Name: TICE, HELEN Name:

Address:7142 GOLF COLONY CT., #203Address:City-St-Zip:LAKE WORTH, FL 33467City-St-Zip:

Title: S () Delete Title: T (X) Change () Addition Name: ZACK, JOSEPH Name: ZACK, JOSEPH

Address: 7118 GOLF COLONY CR #104 Address: 7118 GOLF COLONY CR #104

City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete Title: () Change () Addition

 Name:
 SULLIVAN, JOSEPH
 Name:

 Address:
 7118 GOLF COLONY 205
 Address:

 City-St-Zip:
 LAKE WORTH, FL 33467
 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: STANLEY PASSARELL P 03/16/2009