2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766501

FILED Apr 16, 2009 Secretary of State

Entity Name: LAKESHORE CONDOMINIUM OWNERS' ASSOCIATION, INC.

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

121 SUNSET DRIVE LAKE PLACID, FL 33852

Current Mailing Address: New Mailing Address:

417 EAST INTERLAKE BLVD. LAKE PLACID, FL 33852

FEI Number: 59-1876262 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:

BRANTLEY, II, WILLIAM K 417 EAST INTERLAKE BLVD. LAKE PLACID, FL 33852 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:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 BRANTLEY, WILLIAM K
 Name:
 MILLER, RICK

 Address:
 417 E. INTERLAKE BLVD.
 Address:
 20 W. INTERLAKE BLVD.

 City-St-Zip:
 LAKE PLACID, FL 33852
 City-St-Zip:
 LAKE PLACID, FL 33852

Title: SD () Delete Title: VPD (X) Change () Addition Name: DAVIS, CHERYL B Name: BRANTLEY II, WILLIAM K

Address: 417 E. INTERLAKE BLVD. Address: 417 E. INTERLAKE BLVD.
City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 33852

Title: VPD () Delete Title: SD (X) Change () Addition Name: CALLAHAN, MARK Name: MILLER, JODI

Address: 119 S. BEAR POINTE DRIVE Address: 20 W. INTERLAKE BLVD.
City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 33852

Title: TD () Delete Title: TD (X) Change () Addition

Name:MILLER, RICKName:DAVIS, CHERYL BAddress:19 W. INTERLAKE BLVD.Address:417 E. INTERLAKE BLVD.City-St-Zip:LAKE PLACID, FL 33852City-St-Zip:LAKE PLACID, FL 33852

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: CHERYL B. DAVIS TD 04/16/2009