

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770710

FILED
Jun 27, 2009
Secretary of State

Entity Name: LOCKMAR ESTATES HOMEOWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

P.O. BOX 061387
PALM BAY, FL 329068387

New Principal Place of Business:

840 HUNTINGTON ST., N.E.
PALM BAY, FL 32907

Current Mailing Address:

P.O. BOX 061387
PALM BAY, FL 329068387

New Mailing Address:

FEI Number: 59-2386427 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STUDER, JOHN
243 NEVILLE CIRCLE
PALM BAY, FL 32907 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: P () Delete
Name: JOHN, STUDER
Address: 243 NEVILLE CIR
City-St-Zip: PALM BAY, FL 32907

Title: VP () Delete
Name: GULLIVER, ROGER
Address: 228 HURST RD NE
City-St-Zip: PALM BAY, FL 32907

Title: S () Delete
Name: DEITZ, CHERYL
Address: 1091 PEACOCK AVE
City-St-Zip: PALM BAY, FL 32907

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TREA () Change (X) Addition
Name: CORDELL, PAULINE P
Address: 840 HUNTINGTON ST. NE
City-St-Zip: PALM BAY, FL 32907

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: PAULINE P. CORDELL

TREA

06/27/2009

Electronic Signature of Signing Officer or Director

Date