

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771320

FILED
Jan 16, 2012
Secretary of State

Entity Name: LAKE JEFFERY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

154 NW CYPRESS COVE DR.
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1765
LAKE CITY, FL 320561765 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUST, GERALD W TREASUR
154 NW CYPRESS COVE DR.
LAKE CITY, FL 32055 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: S
Name: JOHNSON, PETER
Address: P.O. BOX 1765
City-St-Zip: LAKE CITY, FL 320561765

Title: VP
Name: BRADTMULLER, RON
Address: PO BOX 1765
City-St-Zip: LAKE CITY, FL 320561765

Title: P
Name: GONZALEZ, EDWIN
Address: P.O. BOX 1765
City-St-Zip: LAKE CITY, FL 320561765

Title: D
Name: JENKINS, T.D.
Address: P.O. BOX 1765
City-St-Zip: LAKE CITY, FL 320561765

Title: D
Name: EDWARDS, ROB
Address: POB 1765
City-St-Zip: LAKE CITY, FL 32056

Title: D
Name: GONZALEZ, EDWIN
Address: POB 1765
City-St-Zip: LAKE CITY, FL 32056

I hereby 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 all other like empowered.

SIGNATURE: GERALD W. GUST

T

01/16/2012

Electronic Signature of Signing Officer or Director

Date