2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# F96000004438

Entity Name: LAKE MARTIN EPISCOPAL RETREAT, INC.

Current Principal Place of Business:

4399 COMMONS DRIVE EAST
300
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

4421 COMMONS DR
SUITE B103, PMB 404
DESTIN, FL 325413487

New Mailing Address:

FEI Number: 63-0892596 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOBLEY, FORREST C REV/DR
4421 COMMONS DR
SUITE B103, PMB 404
DESTIN, FL 325413487 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:	MOBLEY, FORREST C REV/DR	
Address:	4421 COMMONS DR SUITE B103, PMB 404	
City-St-Zip:	DESTIN, FL 325413487	
Title:	ST	( ) Delete
Name:	MOBLEY, NANCY MRS	
Address:	4421 COMMONS DR SUITE B103, PMB 404	
City-St-Zip:	DESTIN, FL 32541	
Title:	C	( ) Delete
Name:	LANCE, WILLIAM DR	
Address:	7024 DARYN LANE	
City-St-Zip:	FORT COLLINS, CO 80524	
Title:	D	( ) Delete
Name:	BLACKBURN, BILL DR	
Address:	1295 LITTLE HARBOUR LANE	
City-St-Zip:	VERO BEACH, FL 32963	
Title:	D	( ) Delete
Name:	PARDONNER, DAVE	
Address:	497 DEER POINT DR	
City-St-Zip:	GULF BREEZE, FL 325614520	
Title:	D	( ) Delete
Name:	MILLING, BERT HON	
Address:	18935 SCENIC HWY 98	
City-St-Zip:	FAIRHOPE, AL 36532	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: DR. WILLIAM LANCE C 04/01/2009

Electronic Signature of Signing Officer or Director — Date