

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G94884

FILED
Mar 14, 2012
Secretary of State

Entity Name: LAKE SEMINOLE RESORT SOUTH RESIDENCE, INC.

Current Principal Place of Business:

8201 SEMINOLE BLVD
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

8201 SEMINOLE BLVD
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 59-2389868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH R. CIANFRONE, P.A.
1964 BAYSHORE BLVD STE A
DUNEDIN, FL 34698 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: PD
Name: GRAY, ELEANOR
Address: 102 GORDON DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: VD
Name: ELLIS, WILLIAM
Address: 435 DENICE DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: SD
Name: EMBREY, MARLYN
Address: 234 CAROL DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: D
Name: ROBERT, HALPIN
Address: 614 LAKESIDE DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: D
Name: MORRISON, BETTY
Address: 539 SKIPPER DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: TD
Name: FITCH, WILLIAM
Address: 133 GORDON DR.
City-St-Zip: SEMINOLE, FL 33772

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELEANOR GRAY

PRES

03/14/2012

Electronic Signature of Signing Officer or Director

Date