2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N00000001814

Entity Name: THE LAKES OF BLACK BEAR RESERVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

107 N. LINE DR.
APOPKA, FL 32703

New Principal Place of Business:

2582 S. MAGUIRE RD.
#318
OCOEE, FL 34761

Current Mailing Address:

107 N. LINE DR.
APOPKA, FL 32703

New Mailing Address:

P.O. BOX 783367
WINTER GARDEN, FL 34778

FEI Number: 59-3642976 **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:

SOLOMON, SPENCER R
14443 PRUNNINGWOOD PLACE
WINTER GARDEN, FL 34787 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: SPENCER R. SOLOMON 04/28/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CARSON, MARK
Address: P.O. BOX 520
City-St-Zip: SORRENTO, FL 32776

Title: VTD ( ) Delete
Name: CARSON, LEE ANN
Address: P.O. BOX 420
City-St-Zip: SORRENTO, FL 32776

Title: SD ( ) Delete
Name: CARSON, ASHLEY
Address: 24525 CR 44A
City-St-Zip: EUSTIS, FL 32736

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change (X) Addition
Name: WHISNER, MAC
Address: 36628 MONTEVERDE CT.
City-St-Zip: EUSTIS, FL 32736

Title: VTD (X) Change (X) Addition
Name: CARSON, LEE ANN
Address: 23050 OLD 441 RD DR.
City-St-Zip: SORRENTO, FL 32776

Title: STD (X) Change ( ) Addition
Name: MIRANDO, BARBARA
Address: 37047 BARRINGTON DR.
City-St-Zip: EUSTIS, FL 32736

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: MAC WHISNER PD 04/28/2009
Electronic Signature of Signing Officer or Director Date