

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 22, 2009
Secretary of State

DOCUMENT# N00000002860

Entity Name: SAVE OUR LAKES ORGANIZATION, INC.**Current Principal Place of Business:**5873 COUNTY RD 352
KEYSTONE HEIGHTS, FL 32656**New Principal Place of Business:**6579 IMMOKALEE ROAD
KEYSTONE HEIGHTS, FL 32656**Current Mailing Address:**PO BOX 185
KEYSTONE HEIGHTS, FL 32656**New Mailing Address:****FEI Number:** 59-3656777 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BARNHARDT, DENNIS
5873 COUNTY RD 352
KEYSTONE HEIGHTS, FL 32656 US**Name and Address of New Registered Agent:**KATZ, VIVIAN H
6579 IMMOKALEE ROAD
KEYSTONE HEIGHTS, FL 32656 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: VIVIAN H. KATZ

09/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARNHARDT, DENNIS PRES
Address: 5873 COUNTY RD 352
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: VD () Delete
Name: KATZ, VIVIAN V PRES
Address: 6579 IMMOKALEE RD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: SD () Delete
Name: BARNHARDT, JANET SEC
Address: 5873 COUNTY RD 352
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: TD () Delete
Name: GILL, DUANE TRE
Address: 1913 HARBOR ISLAND DRIVE
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KATZ, VIVIAN PRES
Address: 6579 IMMOKALEE ROAD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: VD (X) Change () Addition
Name: CALIFANO, JOE V PRES
Address: 6120 S. TWIN LAKES ROAD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: SD (X) Change () Addition
Name: KING, JACQUELINE SEC
Address: 275 S E LAKEVIEW DRIVE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: TD (X) Change () Addition
Name: KATZ, SHERMAN TRE
Address: 6579 IMMOKALEE ROAD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

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: VIVIAN H. KATZ

PD

09/22/2009

Electronic Signature of Signing Officer or Director

Date