

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003830

FILED
Mar 24, 2011
Secretary of State

Entity Name: LAKELAND HOUSING AUTHORITY RESIDENT ADVISORY ASSOCIATION OF THE HOUSING
AUTHORITY OF THE CITY OF LAKELAND, FL, INC.

Current Principal Place of Business:

501 HARTSELL AVENUE
APT # 1
LAKELAND, FL 33815

New Principal Place of Business:

Current Mailing Address:

501 HARTSELL AVENUE
APT # 1
LAKELAND, FL 33815

New Mailing Address:

FEI Number: 59-3650798 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HAYNES, EARL
430 S. HARTSELL AVE
LAKELAND, FL 33815 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: BROWN, LILLIE M
Address: 501 HARTSELL AVENUE APT. #1
City-St-Zip: LAKELAND, FL 33815

Title: S
Name: LPOEZ, JENNY
Address: 501 HARTSELL AVE #1
City-St-Zip: LAKELAND, FL 33815

Title: TD
Name: MCGEE, NITA
Address: 501 HARTSELL AVENUE APT #1
City-St-Zip: LAKELAND, FL 33815

Title: SAA
Name: CALIXTE, PIERRE
Address: 501 HARTSELL AVENUE APT #1
City-St-Zip: LAKELAND, FL 33815

Title: VP
Name: DUNCAN, PATRICIA
Address: 501 HARTSELL AVE APT #1
City-St-Zip: LAKELAND, FL 33815

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: NITA MCGEE

TD

03/24/2011

Electronic Signature of Signing Officer or Director

Date