

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Apr 11, 2012
Secretary of State**

DOCUMENT# N00000003830

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:**1500 N. NEW YORK AVENUE
LAKELAND, FL 33805**Current Mailing Address:**501 HARTSELL AVENUE
APT # 1
LAKELAND, FL 33815**New Mailing Address:**1500 N. NEW YORK AVENUE
LAKELAND, FL 33805**FEI Number:** 59-3650798**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****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: 1500 N. NEW YORK AVENUE
City-St-Zip: LAKELAND, FL 33805**Title:** S
Name: LOPEZ, JENNY
Address: 1500 N. NEW YORK AVENUE
City-St-Zip: LAKELAND, FL 33805**Title:** TD
Name: MCGEE, NITA
Address: 1500 N. NEW YORK AVENUE
City-St-Zip: LAKELAND, FL 33805**Title:** SAA
Name: CALIXTE, PIERRE
Address: 1500 N. NEW YORK AVENUE
City-St-Zip: LAKELAND, FL 33805**Title:** VP
Name: DUNCAN, PATRICIA
Address: 1500 N. NEW YORK AVENUE
City-St-Zip: LAKELAND, FL 33805

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: EARL HAYNES

RA

04/11/2012

Electronic Signature of Signing Officer or Director

Date