2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2009
Secretary of State

DOCUMENT# N01000001056

Entity Name: LAKE TEMPLE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 650788
VERO BEACH, FL 329650788 US

New Principal Place of Business:

410 E. TEMPLE CT
VERO BEACH, FL 32968 US

Current Mailing Address:

P.O. BOX 650788
VERO BEACH, FL 329650788 US

New Mailing Address:

FEI Number: 59-3731654 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCKINNON, CHARLES W ESQ.
5070 N. HWY A-1-A, STE 200
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

MCKINNON, CHARLES W ESQ.
3055 CARDINAL DR
VERO BEACH, FL 32963 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: _____ 06/28/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: LEMMA, JANET
Address: 382 W TEMPLE CT
City-St-Zip: VERO BEACH, FL 32968

Title: VPD ( ) Delete
Name: GADREAULT, JOSEPH
Address: 425 E TEMPLE CT
City-St-Zip: VERO BEACH, FL 32968

Title: SD ( ) Delete
Name: KUGELMAN, DIANE
Address: 375 E TEMPLE CT
City-St-Zip: VERO BEACH, FL 32968

Title: D ( ) Delete
Name: WOLFE, RICHARD
Address: 5430 TEMPLE TERR
City-St-Zip: VERO BEACH, FL 32968

Title: D ( ) Delete
Name: HARK, FRED
Address: 391 W TEMPLE CT
City-St-Zip: VERO BEACH, FL 32968

Title: PDT ( ) Delete
Name: FRITZPATRICK, LOUIS
Address: 410 E TEMPLE CT
City-St-Zip: VERO BEACH, FL 32968

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: LOUIS FITZPATRICK PDT 06/28/2009
Electronic Signature of Signing Officer or Director — Date