

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 27, 2010
Secretary of State

DOCUMENT# N01000003465

Entity Name: DANFORTH LAKES HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044**New Principal Place of Business:****Current Mailing Address:**2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044**New Mailing Address:****FEI Number:** 03-0387463**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 327795044 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: OLIVER, MATT
Address: 12802 ASTON OAKS DR
City-St-Zip: FORT MYERS, FL 33912

Title: VPD
Name: DEAN, MICHAEL
Address: 12701 ASTON OAKS DR
City-St-Zip: FORT MYERS, FL 33912

Title: SD
Name: LOGUE, PATRICK
Address: 12806 ASTON OAKS DR
City-St-Zip: FORT MYERS, FL 33912

Title: TD
Name: SLOMAN, LINDA
Address: 9017 FALCON POINTE LOOP
City-St-Zip: FORT MYERS, FL 33912

Title: D
Name: SILVERMAN, CLAUDIA
Address: 8916 FAWN RIDGE DR
City-St-Zip: FORT MYERS, FL 33912

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: MATT OLIVER

PD

05/27/2010

Electronic Signature of Signing Officer or Director

Date