

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01350

FILED
Apr 29, 2011
Secretary of State

Entity Name: THE LAKES AT UNIVERSITY CENTER HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

191 PINE LANE
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

Current Mailing Address:

2910 KERRY FOREST PARKWAY
D4, BOX 303
TALLAHASSEE, FL 32309

New Mailing Address:

PO BOX 3965
TALLAHASSEE, FL 32315

FEI Number: 59-2659645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROJAS, COLLEEN E MS
2935 WHIRLAWAY TRAIL
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

ROJAS, COLLEEN E MS
191 PINE LANE
CRAWFORDVILLE, FL 32327 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: KELLY ROJAS

04/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: NELSON, MICHAEL
Address: PO BOX 3965
City-St-Zip: TALLAHASSEE, FL 32315

Title: S
Name: HARRIETT, STEVE
Address: PO BOX 3965
City-St-Zip: TALLAHASSEE, FL 32315

Title: D
Name: THOMPSON, WAYNE
Address: PO BOX 3965
City-St-Zip: TALLAHASSEE, FL 32315

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: MICHAEL NELSON

P

04/29/2011

Electronic Signature of Signing Officer or Director

Date