

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01874

FILED  
Apr 02, 2009  
Secretary of State

**Entity Name:** LAKE PINE ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4797 SUNNY PALM CIRCLE  
WEST PALM BEACH, FL 33415 US

**New Principal Place of Business:**

**Current Mailing Address:**

4797 SUNNY PALM CIRCLE  
WEST PALM BEACH, FL 33415 US

**New Mailing Address:**

**FEI Number:** 59-2660882

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RUBIN, STEVEN D  
980 NORTH FEDERAL HIGHWAY  
SUITE # 434  
BOCA RATON, FL, FL 33432 US

**Name and Address of New Registered Agent:**

RUBIN, STEVEN D  
980 NORTH FEDERAL HIGHWAY  
SUITE # 434  
BOCA RATON, FL 33432 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:

04/02/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP (X) Delete  
Name: GORDON, DESROY  
Address: 4822 D SUNNY PALM CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D ( ) Delete  
Name: LEMOS, CARLOS  
Address: 4838 B SUNNY PALM CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D ( ) Delete  
Name: VILLALTA, ROXANA  
Address: 4766 C SUNNY PALM CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D ( ) Delete  
Name: LEWIS, DINA  
Address: 4806 B SUNNY PALM CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D ( ) Delete  
Name: MONTESDE OCA, RENE  
Address: 4774 A SUNNY PALM CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D (X) Delete  
Name: VIEIRA, SONIA  
Address: 4758 A SUNNY PALM CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: MIGUEL, MORALES  
Address: 4774 CSUNNY PALM CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415

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: DINA LEWIS

D

04/02/2009

Electronic Signature of Signing Officer or Director

Date