

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000524

FILED
Jul 17, 2008
Secretary of State

Entity Name: LAGO PLANTATION NORTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

151 N.NOB HILL RD
PLANTATION, FL 33325

New Principal Place of Business:

Current Mailing Address:

151 N.NOB HILL RD.
PLANTATION, FL 33325

New Mailing Address:

FEI Number: 81-0584420 **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:

Name and Address of New Registered Agent:

DURR, JAMES A MR.
12901 W.BROWARD BLVD.
PLANTATION, FL 33325 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DURR, JAMES A
Address: 12901 W.BROWARD BLVD.
City-St-Zip: PLANTATION, FL 33325

Title: V () Delete
Name: TATE, RICKY
Address: 151 N.NOB HILL RD.
City-St-Zip: PLANTATION, FL 33325

Title: T () Delete
Name: ANDERSON, JOSEPH
Address: 151 N.NOB HILL RD.
City-St-Zip: PLANTATION, FL 33325

Title: S () Delete
Name: DISARNO, DINA
Address: 151 N.NOB HILL RD.
City-St-Zip: PLANTATION, FL 33325

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:

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: JAMES A. DURR

PRES

07/17/2008

Electronic Signature of Signing Officer or Director

Date