

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002094

FILED
Jun 22, 2009
Secretary of State

Entity Name: LAKE POINTE COMMONS PROFESSIONAL OFFICE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9101 W COLLEGE POINTE DR
SUITE 1
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

9101 W COLLEGE POINTE DR
SUITE 1
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 11-3672245 **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:

BRETT, JAY A
9100 COLLEGE POINTE CT
FORT MYERS, FL 33919 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: SVP () Delete
Name: BRETT, JAY A
Address: 9100 COLLEGE POINTE CT
City-St-Zip: FORT MYERS, FL 33919

Title: PT () Delete
Name: KINSEY, JAMES E JR.
Address: 9101 WEST COLLEGE POINTE DR. STE 1
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: PASSARELLA, KENNETH C
Address: 9110 COLLEGE POINTE CT.
City-St-Zip: FT. MYERS, FL 33919

Title: D () Delete
Name: WALLACE, JERALD L
Address: 9111 WEST COLLEGE POINTE DR.
City-St-Zip: FT. MYERS, FL 33919

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 E KINSEY JR

P

06/22/2009

Electronic Signature of Signing Officer or Director

Date