2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002733

FILED Mar 06, 2009 Secretary of State

Entity Name: LAKE GLORIA SHORES SUBDIVISION HOMEOWNER'S ASSOCIATION INC.

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|---------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------|
| | SCEOLA AVE D, FL 32806 | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| | SCEOLA AVE D, FL 32806 | | | |
| El Number | : 56-2319353 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| ame and | l Address of C | urrent Registered Agent: | Name and Address of New Registered Agent: | |
| | F HOMES | | | |
| | SCEOLA AVE D, FL 32806 | US | | |
| RLAND() he above | SCEOLA AVE D, FL 32806 | | ourpose of changing its registe | red office or registered agent, or both, |
| PRLAND(he above the State | SCEOLA AVE D, FL 32806 e named entity s e of Florida. RE: | ubmits this statement for the p | | |
| PRLANDO he above the State | CEOLA AVE D, FL 32806 e named entity see of Florida. RE: Electroni | ubmits this statement for the p | ent | Date |
| PRLANDO he above the State | SCEOLA AVE D, FL 32806 e named entity s e of Florida. RE: | ubmits this statement for the p | ent | |
| RLANDO he above the State | ECEOLA AVE D, FL 32806 e named entity se of Florida. RE: Electroni S AND DIRECT | ubmits this statement for the price Signature of Registered Age FORS: Delete | ent | Date |
| RLANDO the above the State IGNATUI FFICER ttle: ame: ddress: | ECEOLA AVE D, FL 32806 e named entity s e of Florida. RE: Electroni S AND DIRECT PD () LYNCH, JAMES 130 SURA BLVE ORLANDO, FL | ubmits this statement for the price Signature of Registered Age FORS: Delete 32809 Delete | ent ADDITIONS/CHAN Title: Name: Address: | Date GES TO OFFICERS AND DIRECTO |

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: EDDIE VARGAS, JR. PM 03/06/2009