

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004594

FILED
Feb 25, 2009
Secretary of State

Entity Name: LIGHTHOUSE POINTE AT BAYWINDS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

WELLINGTON MANAGEMENT, INC
3461 B FAIRLANE FARMS RD
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

WELLINGTON MANAGEMENT, INC
3461 B FAIRLANE FARMS RD
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 14-1865873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWSOME, JOHN
WELLINGTON MANAGEMENT INC
3461 B FAIRLANE FARMS RD
WELLINGTON, FL 33414 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: VP () Delete
Name: LOGALGO, FRANKLIN
Address: 2289 WIND JAMMER WAY
City-St-Zip: WEST PALM BEACH, FL 33411

Title: S () Delete
Name: FRIEDBERG, SHELDON
Address: 9871 GALLEON DRIVE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: T () Delete
Name: WOLFSON, STEPHEN
Address: 9947 CALLEON DR
City-St-Zip: WEST PALM BEACH, FL 33411

Title: P () Delete
Name: BARNETT, BERNARD
Address: 2374 HARBOUR VIEW CT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D () Delete
Name: KATZ, NANCY
Address: 2377 WINDJAMMER WAY
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: LOGALBO, FRANKLIN
Address: 2289 WIND JAMMER WAY
City-St-Zip: WEST PALM BEACH, FL 33411

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

Title: T (X) Change () Addition
Name: WOLFSON, STEPHEN
Address: 9947 GALLEON DR
City-St-Zip: WEST PALM BEACH, FL 33411

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: BERNARD BARNETT

P

02/25/2009

Electronic Signature of Signing Officer or Director

Date