

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006002

FILED
Apr 02, 2009
Secretary of State

Entity Name: LAKE HOMES AT TARPON GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9411 CYPRESS LAKE DRIVE
SUITE 2
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

9411 CYPRESS LAKE DRIVE
SUITE 2
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 55-0790380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOO, PATRICIA
9411 CYPRESS LAKE DRIVE
SUITE 2
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: PD () Delete
Name: RUTTER, JOE
Address: 5909 TARPON GARDENS CIRCLE, #102
City-St-Zip: CAPE CORAL, FL 33914

Title: DV () Delete
Name: WILLIAMS, BRIAN
Address: 5913 TARPON GARDENS CIRCLE #102
City-St-Zip: CAPE CORAL, FL 33914

Title: STD () Delete
Name: BARKER, CURTIS
Address: 5921 TARPON GARDENS CIRCLE #101
City-St-Zip: CAPE CORAL, FL 33914

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:

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: PATRICIA SCHOO

CAM

04/02/2009

Electronic Signature of Signing Officer or Director

Date