

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007839

FILED
Mar 25, 2008
Secretary of State

Entity Name: LAKE BROOKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2179 LAKE BROOKE DRIVE
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

2179 LAKE BROOKE DRIVE
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 20-0257165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, SUSAN S
3520 THONASVILLE ROAD
4TH FLOOR
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

THOMPSON, SUSAN S
3520 THOMASVILLE ROAD
4TH FLOOR
TALLAHASSEE, FL 32309 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:

03/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BALDWIN, THOMAS L
Address: 2165 LAKE BROOKE DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: BALDWIN, JANA L
Address: 2165 LAKE BROOKE DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: ST () Delete
Name: MARKLEY, JULIE G
Address: 2179 LAKE BROOKE DR.
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BALDWIN, THOMAS L
Address: 4030 N. MONROE, STE. Z
City-St-Zip: TALLAHASSEE, FL 32303

Title: D (X) Change () Addition
Name: BALDWIN, JANA L
Address: 4030 N. MONROE ST., STE. Z
City-St-Zip: TALLAHASSEE, FL 32303

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: JULIE G. MARKLEY

ST

03/25/2008

Electronic Signature of Signing Officer or Director

Date