## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000008733

FILED Apr 14, 2009 Secretary of State

Entity Name: LAKE KENNEDY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

ROSSMAN REALTY PROPERTY MGMT LLC 402-406 SW 3RD STREET 1104 SE 46TH LANE #2 CAPE CORAL, FL 33991

CAPE CORAL, FL 33904

**Current Mailing Address:** 

**New Mailing Address:** 

ROSSMAN REALTY PROPERTY MGMT LLC 1104 SE 46TH LANE #2 CAPE CORAL, FL 33904

FEI Number: 38-3706271 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROSSMAN, MICHELLE CAM ROSSMAN REALTY PROPERTY MGMT.,LLC 1104 SE 46TH LANE #2 CAPE CORAL, FL 33904 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete KREMPSKI, ANTONETTE KREMPSKI, ANTONETTE Name: Name: 51 DUNWOOD RD Address: 800 WITTENBERG RD Address:

City-St-Zip: PORT WASHINGTON, NY 11050 City-St-Zip: MT. TREMPER, NY 12457

Title: VD () Delete Title: () Change () Addition FINNEGAN, WILLIAM Name: Name:

Address: 42 HOPSWELL DR Address: City-St-Zip: SPARLAND, IL 61565 City-St-Zip:

Title: STD () Delete Title: STD (X) Change ( ) Addition VALENZIO, FRANCES

VALENZIO, FRANCES Name: Name: Address: 402 SW 3RD ST #201A Address: 402 SW 3RD ST #201A City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33991

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: SCHNEIDER, LOTTIE Address: Address: 406 SW 3RD ST #102B City-St-Zip: City-St-Zip: CAPE CORAL, FL 33991

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: MICHELLE ROSSMAN CAM 04/14/2009