2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2009
Secretary of State

DOCUMENT# N04000010817

Entity Name: LAKE JACKSON PROTECTION ALLIANCE, INC.

Current Principal Place of Business:

203 NORTH GADSDEN STREET., #6
TALLAHASSEE, FL 323017633

New Principal Place of Business:

203 NORTH GADSDEN STREET, #6
TALLAHASSEE, FL 323017633

Current Mailing Address:

1700 N MONROE ST
STE 11-312
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 20-1903037 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWIS, GEORGE E II
203 NORTH GADSDEN STREET., #6
TALLAHASSEE, FL 323017633 US

Name and Address of New Registered Agent:

LEWIS, GEORGE E II
203 NORTH GADSDEN STREET, #6
TALLAHASSEE, FL 323017633 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: _____ 02/11/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BREZIN, MICHAEL
Address: 1401 WEST RANDOLPH CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD ( ) Delete
Name: KOWAL, JOANNE E
Address: 4871 OLD BAINBRIDGE ROAD
City-St-Zip: TALLAHASSEE, FL 32303

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD ( ) Change (X) Addition
Name: BRADY, C. T
Address: P. O. BOX 180732
City-St-Zip: TALLAHASSEE, FL 323180007

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: JOANNE E. KOWAL TREA 02/11/2009
Electronic Signature of Signing Officer or Director — Date