2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012090

FILED Mar 01, 2009 Secretary of State

Entity Name: LAKES EDGE AT DEEP CREEK CONDOMINIUM ASSOCIATION, INC.

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

1487 SAN CRISTOBAL 1487 SAN CRISTOBAL

PUNTA GORDA, FL 33983 PUNTA GORDA, FL 33983 US

Current Mailing Address: New Mailing Address:

100 SULLIVAN ST #112 100 SULLIVAN ST #112

PUNTA GORGA, FL 33950 US

FEI Number: 20-2881827 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:

GREENE, JOAN 100 SULIVAN ST #112 PUNTA GORDA, FL 34231 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:

Flackwaria Ciamakura of Danishara d Anauk

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Change

 Name:
 STEVENS, DANIEL
 Name:
 PERRAULT, MICHAEL

Address: 1457 SAN CRISTOBAL AVE #3205 Address: 1457 SAN CRISTOBAL AVE #2205

City-St-Zip: PUNTA GORDA, FL 33983 City-St-Zip: PUNTA GORDA, FL 33983 US

Title: TD () Delete Title: TD (X) Change () Addition Name: MCCARTHY, JOHN Name: MCCARTHY, JOHN

Address: 1501 SAN CRISTOBAL AVE #1206 Address: 1501 SAN CRISTOBAL AVE #1206

City-St-Zip: PUNTA GORDA, FL 33983 City-St-Zip: PUNTA GORDA, FL 33983 US

 Name:
 GELTZ, ROBERT
 Name:
 GLINSKI, RICHARD

 Address:
 7037 ELAINE AVE NW
 Address:
 8200 STONE RD

City-St-Zip: NORTH CLAYTON, OH 84720 City-St-Zip: INDEPENDENCE, OH 44131 US

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

Name: Name: BODEN, MICHAEL
Address: Address: 2110 CASSINO COURT

City-St-Zip: City-St-Zip: PUNTA GORDA, GL 33950 US

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: MICHAEL PERRAULT PRES 03/01/2009

Electronic Signature of Signing Officer or Director

Date