## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001204

FILED Jan 12, 2008 Secretary of State

Entity Name: LAKE MCBRIDE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6949 MCBRIDE POINTE 6240 OLD WATER OAK RD TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312 **Current Mailing Address: New Mailing Address:** 6949 MCBRIDE POINTE 6240 OLD WATER OAK RD TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312 FEI Number: 20-8326776 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: KEARNEY, RICK KEARNEY, RICK 6949 MCBRIDE POINTE 6240 OLD WATER OAK RD TALLAHASSEE, FL 32312 US TALLAHASSEE, FL 32312 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: RICHARD S KEARNEY 01/12/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MCNEILL, MAC P Name: Name: 6982 STANDING PINES LANE Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: MR. Title: () Delete () Change () Addition Name: PITISCI, JIM V Name: Address: 2622 MILLSTONE PLANTATION RD Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition KEARNEY, RICK S Name: KEARNEY, RICK S Name: 6949 MCBRIDE POINTE 6240 OLD WATER OAK RD Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: TALLAHASSEE, FL 32312 Title: MR. ( ) Delete Title: () Change () Addition Name: HEMPHILL, DEARL T Name: 6961 MCBRIDE POINTE Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: Title: () Delete () Change () Addition BREEZE, FRED D Name: Name: 6937 MCBRIDE POINTE Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 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: RICHARD S KEARNEY D 01/12/2008