

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005225

FILED
Apr 14, 2009
Secretary of State

Entity Name: IRMA LAKES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1801 COOK AVENUE
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

1801 COOK AVENUE
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 20-2947128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASHER, STEVEN D
1801 COOK AVENUE
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: CHRISTENSEN, RUSS
Address: 2824 LAKEWOOKE POINTE DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: VD () Delete
Name: BEODRAM, KRANSTON
Address: 3012 LAKEWOOKE POINTE DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: TD () Delete
Name: PATEL, RASIK
Address: 3031 LAKEWOOKE POINTE DRIVE
City-St-Zip: ORLANDO, FL 32817

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: TD (X) Change () Addition
Name: GUZMAN, EVELYN
Address: 2721 LAKEWOOD POINTE DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: SD () Change (X) Addition
Name: RAHAL-CHEHAB, LUBNA
Address: 8712 IRMASTONE WAY
City-St-Zip: ORLANDO, FL 32817

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: RUSS CHRISTENSEN

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date