

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012669

FILED
Apr 30, 2009
Secretary of State

Entity Name: LAGOON MIST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

181 SANDERS RD.
OAKHAM, MA 01068

New Principal Place of Business:

181-A SANDERS ROAD
OAKHAM, MA 01068

Current Mailing Address:

124 FAULKNER STREET
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 42-1698893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, MARK R
124 FAULKNER ST.
NEW SMYRNA BCH, FL 32168 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: D () Delete
Name: GIAQUINTO, ANTHONY
Address: P. O. BOX 37
City-St-Zip: OAKHAM, MA 01068

Title: D () Delete
Name: KRAHAM, KEITH
Address: 88 LAKE STREET
City-St-Zip: COOPERSTOWN, NY 13326

Title: D () Delete
Name: GIAQUINTO, ANN MARIE
Address: P. O. BOX 37
City-St-Zip: OAKHAM, MA 01068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GIAQUINTO, ANTHONY
Address: 181-A SANDERS ROAD
City-St-Zip: OAKHAM, MA 01068

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

Title: () Change () Addition
Name:
Address:
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: ANTHONY GIAQUINTO

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date