

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001487

FILED
Apr 21, 2009
Secretary of State

Entity Name: GRANDE PINES AT LAKESIDE VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1600 WEST COLONIAL DRIVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

1600 WEST COLONIAL DRIVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 20-5768333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, JACK
1600 WEST COLONIAL DRIVE
ORLANDO, FL 32804 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: MCCARTHY, THOMAS P
Address: 4700 MILLENIA BLVD., SUITE 400
City-St-Zip: ORLANDO, FL 32839

Title: VD () Delete
Name: PETERSON, DON
Address: 4700 MILLENIA BLVD., SUITE 400
City-St-Zip: ORLANDO, FL 32839

Title: STD () Delete
Name: DOWLING, LARRY
Address: 4700 MILLENIA BLVD., SUITE 400
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROSSER, STEVE
Address: 4700 MILLENIA BLVD., SUITE 400
City-St-Zip: ORLANDO, FL 32839

Title: VD (X) Change () Addition
Name: MAKSIMOVISH, DAVID
Address: 4700 MILLENIA BLVD., SUITE 400
City-St-Zip: ORLANDO, FL 32839

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: STEVE ROSSER

D

04/21/2009

Electronic Signature of Signing Officer or Director

Date