## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000003495

**Current Principal Place of Business:** 

Entity Name: LAKE TRIANGLE USBC INC

FILED Mar 22, 2009 Secretary of State

1980 HEATHER ST MOUNT DORA, FL 32757

Current Mailing Address: New Mailing Address:

1980 HEATHER ST MOUNT DORA, FL 32757

FEI Number: 42-1699353 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:

GARRETT, THOMAS N 1980 HEATHER ST MOUNT DORA, FL 32757 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**New Principal Place of Business:** 

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HUFFMAN, HAROLD E
 Name:

 Address:
 10551 GOOSE PRARIE RD
 Address:

 City-St-Zip:
 LEESBURG, FL 34788
 City-St-Zip:

Title: V ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ADKINS, MARYANN
 Name:

 Address:
 1116 DORA AVE
 Address:

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:

Title: V ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BROWN, DAVID
 Name:

 Address:
 PO BOX 100
 Address:

 City-St-Zip:
 PAISLEY, FL 32767
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GARRETT, THOMAS N
 Name:

 Address:
 1980 HEATHER ST
 Address:

 City-St-Zip:
 MOUNT DORA, FL 32757
 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: THOMAS N. GARRETT D 03/22/2009