

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010128

FILED
Feb 12, 2008
Secretary of State

Entity Name: LIONS GATE OF POLK COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8297 CHAMPIONS GATE, BOULEVARD
#504
CHAMPIONS GATE, FL 33896

New Principal Place of Business:

8297 CHAMPIONS GATE BOULEVARD
#504
CHAMPIONS GATE, FL 33896

Current Mailing Address:

8297 CHAMPIONS GATE, BOULEVARD #504
CHAMPIONS GATE, FL 33896

New Mailing Address:

8297 CHAMPIONS GATE BOULEVARD
#504
CHAMPIONS GATE, FL 33896

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTU, HARDY
8297 CHAMPIONS GATE, BOULEVARD
#504
CHAMPIONS GATE, FL 33896 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: MATTU, HARDY
Address: 8297 CHAMPIONS GATE, BOULEVARD #504
City-St-Zip: CHAMPIONS GATE, FL 33896

Title: D () Delete
Name: MATTU, ALISON
Address: 8297 CHAMPIONS GATE, BOULEVARD #504
City-St-Zip: CHAMPIONS GATE, FL 33896

Title: D () Delete
Name: HALL, PATTI L
Address: 8297 CHAMPIONS GATE, BOULEVARD #504
City-St-Zip: CHAMPIONS GATE, FL 33896

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BOYCE, KRISTAL
Address: 8297 CHAMPIONS GATE, BOULEVARD #504
City-St-Zip: CHAMPIONS GATE, FL 33896

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: HARDY MATTU

D

02/12/2008

Electronic Signature of Signing Officer or Director

Date