2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06218

FILED Mar 15, 2010 Secretary of State

Entity Name: LAMPLIGHTER MOBILE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3202 S. NOVA RD.

PORT ORANGE, FL 32129

Current Mailing Address: New Mailing Address:

38 WOODVILLE LANE 74 EAST PIEDMONT AVE. PORT ORANGE, FL 32129 PORT ORANGE, FL 32129

FEI Number: 59-2728599 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:

BEAULIER, WILLIAM R 236 CHRIS DR

PORT ORANGE, FL 32129 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:

Title:

Name: BEAULIER, WILLIAM R
Address: 236 CHRIS DR
City-St-Zip: PORT ORANGE, FL 32129

Title: VP

Name: ROBERTUCCI, PETER
Address: 229 CHRIS DRIVE
City St. Zip: PORT ORANIGE EL 321

City-St-Zip: PORT ORANGE, FL 32129

Title: T

Name: SCHRECKENGOST, RENE

Address: 50 JAN LANE

City-St-Zip: PORT ORANGE, FL 32129

Title:

Name: SAWYER, LINDA
Address: 74 EAST PIEDMONT AVE.
City-St-Zip: PORT ORANGE, FL 32129

Title: D

 Name:
 PARKER, EDWARD

 Address:
 237 W. PIEDMONT

 City-St-Zip:
 PORT ORANGE, FL 32129

Title: [

Name: HIBBARD, RICHARD
Address: 164 TYLER DRIVE
City-St-Zip: PORT ORANGE, FL 32129

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM R. BEAULIER PRES 03/15/2010