2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# N07000000691

Entity Name: LAKE SAN MARINO RESIDENTS ASSOCIATION INCORPORATED

Current Principal Place of Business:

1000 WIGGINS PASS RD E
NAPLES, FL 341106300

New Principal Place of Business:

Current Mailing Address:

1000 WIGGINS PASS RD E
NAPLES, FL 341106300

New Mailing Address:

FEI Number: 51-0656948 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COTE, CONRAD
LAKE SAN MARINO RV RESORT
1000 WIGGINS PASS RD E - UNIT 43
NAPLES, FL 341106300 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: P ( ) Delete
Name: WESOLEK, TED
Address: SAN MARINO CIR - # 317
City-St-Zip: NAPLES, FL 341106300

Title: VP ( ) Delete
Name: MARCHESE, JOSEPH
Address: ANGLERS COVE - # 276
City-St-Zip: NAPLES, FL 341106300

Title: S ( ) Delete
Name: LYNCH, PATRICIA
Address: MARINER COVE #89
City-St-Zip: NAPLES, FL 34110

Title: T ( ) Delete
Name: HOYING, JIM
Address: SAN MARINO CIR - # 323
City-St-Zip: NAPLES, FL 341106300

Title: AT ( ) Delete
Name: BRANDEL, DOM
Address: SAN MARINO CIR - # L47
City-St-Zip: NAPLES, FL 341106300

Title: D ( ) Delete
Name: COTE, CONRAD
Address: SEABREEZE PLACE - # 43
City-St-Zip: NAPLES, FL 341106300

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MELCHER, DANA
Address: SAN MARINO CIR - # 354
City-St-Zip: NAPLES, FL 341106300

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

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

Title: T (X) Change ( ) Addition
Name: JUDD, PAUL
Address: SAN MARINO CIR - # L-26
City-St-Zip: NAPLES, FL 341106300

Title: AT (X) Change ( ) Addition
Name: SWOPE, MARILYN
Address: SAN MARINO CIR - # L-36
City-St-Zip: NAPLES, FL 341106300

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: CONRAD A. COTE RA 04/08/2009

Electronic Signature of Signing Officer or Director — Date