

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002696

FILED
Apr 05, 2012
Secretary of State

Entity Name: LAKEFRONT SCC PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1105 BEACH BOULEVARD
SUN CITY CENTER, FL 33573

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 6271
SUN CITY CENTER, FL 335716271

New Mailing Address:

POST OFFICE BOX 6271
SUN CITY CENTER, FL 33571

FEI Number: 59-6130473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINES, JAMES P JR.
315 S. HYDE PARK AVENUE
TAMPA, FL 33606 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
Name: STROH, LAWRENCE J JR.
Address: 1105 BEACH BOULEVARD
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VD
Name: GUDZAK, JOHN
Address: 1107 BEACH BOULEVARD
City-St-Zip: SUN CITY CENTER, FL 33573

Title: SD
Name: JANES, SHEILA L
Address: 1209 BEACH BOULEVARD
City-St-Zip: SUN CITY CENTER, FL 33573

Title: TD
Name: REATHERFORD, GAIL C
Address: 1005 BEACH BOULEVARD
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D
Name: SYMONDS, JACK
Address: 1101 BEACH BLVD
City-St-Zip: SUN CITY CENTER, FL 33573

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: GAIL C REATHERFORD

TD

04/05/2012

Electronic Signature of Signing Officer or Director

Date