

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000012069

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** LAMPLIGHTER VILLAGE ACTIVITIES, INC.

**Current Principal Place of Business:**

212 WALTON COURT  
MELBOURNE, FL 32934

**New Principal Place of Business:**

**Current Mailing Address:**

212 WALTON COURT  
MELBOURNE, FL 32934

**New Mailing Address:**

**FEI Number:** 42-1750040

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MALAMISURA, CONNIE  
212 WALTON COURT  
MELBOURNE, FL 32934 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: T  
Name: ALIE, DOLORES  
Address: 249 WESTWIND CT  
City-St-Zip: MELBOURNE, FL 32934

Title: VP  
Name: HOVER, EILEEN  
Address: 477 WINDSHORE CT  
City-St-Zip: MELBOURNE, FL 32934

Title: P  
Name: MALAMISURA, CONNIE  
Address: 212 WALTON COURT  
City-St-Zip: MELBOURNE, FL 32934

Title: S  
Name: NEWSTROM, CAROL  
Address: 552 WATERFRONT STREET  
City-St-Zip: MELBOURNE, FL 32934

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: CONNIE MALAMISURA

P

01/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date