

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012111

FILED  
Feb 12, 2008  
Secretary of State

Entity Name: LYDIA GROUP OF FLORIDA, INC.

## Current Principal Place of Business:

C/O ST. JOHN BAPTIST  
2025 W. CENTRAL BLVD  
ORLANDO, FL 32805

## New Principal Place of Business:

## Current Mailing Address:

C/O ST. JOHN BAPTIST  
2025 W. CENTRAL BLVD  
ORLANDO, FL 32805

## New Mailing Address:

2873 HIGHLAND VIEW CIRCLE  
CLERMONT, FL 34711 US

FEI Number: 26-1550834

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PAYNE, ANN B  
2873 HIGHLAND VIEW CIRCLE  
CLERMONT, FL 34711 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: DPT ( ) Delete  
Name: PAYNE, ANN B  
Address: 2873 HIGHLAND VIEW CIRCLE  
City-St-Zip: CLERMONT, FL 34711

Title: DV ( ) Delete  
Name: DIXON, TEE  
Address: 842 WATERWAY PLACE  
City-St-Zip: LONGWOOD, FL 32750

Title: DS ( ) Delete  
Name: JOHNSON, ERICA  
Address: 4072 BOSTON COMMON STREET  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: JONES, V.W. SR.  
Address: 4234 PAPPY KENNEDY STREET  
City-St-Zip: ORLANDO, FL 32811

Title: D ( ) Delete  
Name: THOMAS, MAMIE  
Address: 4257 LAKE RICHMOND DRIVE  
City-St-Zip: ORLANDO, FL 32811

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change ( ) Addition  
Name: HUTCHESON, SUMNER III  
Address: 2873 HIGHLAND VIEW CIRCLE  
City-St-Zip: CLERMONT, FL 34711

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: ANN BROWN PAYNE

PRES

02/12/2008

Electronic Signature of Signing Officer or Director

Date