

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07414

FILED
May 29, 2009
Secretary of State

Entity Name: LEMON BAY BREEZES MASTER ASSOCIATION, INC.

Current Principal Place of Business:

1401 MCCALL ROAD, UNIT 309A
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

1401 MCCALL ROAD, UNIT 309A
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 65-0146484 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KEUKER, OSCAR A. F.
1931 TAMIAMI TRAIL, STE. 12
PORT CHARLOTTE, FL 33948 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: D () Delete
Name: STENGER, JOHN
Address: 407 E. MARION AVE., #101 MR. OAKS
City-St-Zip: PUNTA GORDA, FL 33950

Title: PD () Delete
Name: BARTOLI, ROSARIO
Address: 1401 S MCCALL RD #308A
City-St-Zip: ENGLEWOOD, FL 34223

Title: STD () Delete
Name: EISENBEIS, GERALD
Address: 1401 S MCCALL RD #105A
City-St-Zip: ENGLEWOOD, FL 34223

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:

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: OSCAR A F KEUKER

_____ Electronic Signature of Signing Officer or Director

CAM

05/29/2009

_____ Date