## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001808

Secretary of State

Jul 30, 2009

Entity Name: LYMAN ROWING ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2775 SNOW GOOSE LANE 709 S. LOST LAKE LANE LAKE MARY, FL 32746 CASSELBERRY, FL 32707

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 521401 LONGWOOD, FL 327521401

FEI Number: 65-1263252 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: Name and Address of New Registered Agent:

MCGINN, PATRICIA DAY, JODI 2775 SNOW GOOSE LANE 709 S. LOST

2775 SNÓW GOOSE LANE 709 Ś. LOST LAKE LANE LAKE MARY, FL 32746 US CASSELBERRY, FL 32707 US

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: JODI DAY 07/30/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: PRES ( ) Change (X) Addition

 Name:
 Name:
 DAY, JODI

 Address:
 Address:
 709 S. LOST LAKE LANE

 City-St-Zip:
 City-St-Zip:
 CASSELBERRY, FL 32707 US

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: JODI DAY PRES 07/30/2009