

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007434

FILED
Apr 30, 2009
Secretary of State

Entity Name: LEMON BAY HIGH SCHOOL PROJECT GRADUATION, INC.

Current Principal Place of Business:

1410 CORTES DRIVE
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 191
ENGLEWOOD, FL 34295

New Mailing Address:

FEI Number: 26-3221697

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENEDICT, ROBERT C
1861 PLACIDA ROAD
SUITE 204
ENGLEWOOD, FL 342234949 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: HOOTS, TURNER
Address: 2861 13TH STREET
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: AUMAN, BRUCE
Address: 128 MARK TWAIN LANE
City-St-Zip: ROTONDA WEST, FL 33947

Title: D () Delete
Name: JOHNSTON, BETH
Address: 1410 CORTES DRIVE
City-St-Zip: ENGLEWOOD, FL 34223

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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 () Change (X) Addition
Name: DIGNAM, DAVID
Address: 5150 THE POINTE
City-St-Zip: ENGLEWOOD, FL 34223

Title: D () Change (X) Addition
Name: HARRISON, ELIZABETH M
Address: 386 FIRETHORN AVE.
City-St-Zip: ENGLEWOOD, FL 34223

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: ELIZABETH M. HARRISON

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date