

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08311

FILED
Apr 29, 2009
Secretary of State

Entity Name: LAKE PICKETT ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 623278
OVIEDO, FL 327623278

New Principal Place of Business:

2276 MILLS CREEK RD.
CHULUOTA, FL 32766

Current Mailing Address:

LAKE PICKETT ESTATE HOA
P.O. BOX 623278
OVIEDO, FL 327623278

New Mailing Address:

FEI Number: 59-3440135 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SMITH, KATHIE
2476 MILLS CREEK ROAD
CHULUOTA, FL 32766 US

Name and Address of New Registered Agent:

DIETRICH, LISA T
2276 MILLS CREEK RD.
CHULUOTA, FL 32766 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: LISA M. DIETRICH

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LONGENBACH, RUSSELL
Address: 2269 MILLS CREEK RD
City-St-Zip: CHULUOTA, FL

Title: SDT () Delete
Name: SMITH, KATHIE
Address: 2476 MILLS CREEK ROAD
City-St-Zip: CHULUOTA, FL

Title: TS () Delete
Name: DIETRICH, LISA
Address: 2276 MILLS CREEK ROAD
City-St-Zip: CHULUOTA, FL 32766

Title: P () Delete
Name: RAUHOFFER, DON
Address: 2601 MILLS CREEK ROAD
City-St-Zip: CHULUOTA, FL 32766

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LONGENBACH, RUSSELL
Address: 2269 MILLS CREEK RD
City-St-Zip: CHULUOTA, FL 32766

Title: SD (X) Change () Addition
Name: SMITH, KATHIE
Address: 2476 MILLS CREEK ROAD
City-St-Zip: CHULUOTA, FL 32766

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

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

Title: D () Change (X) Addition
Name: SHAEFER, DAVID
Address: 2599 BUCKKNIFE RD.
City-St-Zip: CHULUOTA, FL 32766

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: LISA DIETRICH

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04/29/2009

Electronic Signature of Signing Officer or Director

Date