

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003410

FILED
Jan 30, 2012
Secretary of State

Entity Name: PARADISE VILLAGE OF LAKE PLACID HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

27 HORSESHOE LANE
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

27 HORSESHOE LANE
LAKE PLACID, FL 33852

New Mailing Address:

FEI Number: 26-4642735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIX, AUDREY G
27 HORSESHOE LANE
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

ROLSTON, FRANCES M
12 HORSESHOE LANE
LAKE PLACID, FL 33852 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: FRANCES M. ROLSTON

01/30/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MCNICHOLAS, TERRY
Address: 28 JACKSON PARKWAY
City-St-Zip: LAKE PLACID, FL 33852

Title: VD
Name: GLAZIER, MARILYN
Address: 22 JOANNA DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: D
Name: FOWLER, ROY
Address: 23 JACKSON PKWY
City-St-Zip: LAKE PLACID, FL 33852

Title: D
Name: FOWLER, BILL
Address: 13 PARADISE HILL DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: TD
Name: HIX, AUDREY G
Address: 27 HORSESHOE LANE
City-St-Zip: LAKE PLACID, FL 33852

Title: SD
Name: ROLSTON, FRANCES
Address: 12 HORSESHOE LANE
City-St-Zip: LAKE PLACID, FL 33852

I hereby 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 all other like empowered.

SIGNATURE: FRANCES M. ROLSTON

SD

01/30/2012

Electronic Signature of Signing Officer or Director

Date