

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011371

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** LAKE ALFRED COMMUNITY CENTER, INC

**Current Principal Place of Business:**

485 W. HAINES BLVD.  
LAKE ALFRED, FL 33850 US

**New Principal Place of Business:**

305 GOODMAN AVE.  
LAKE ALFRED, FL 33850 US

**Current Mailing Address:**

305 GOODMAN AVE  
LAKE ALFRED, FL 33850 US

**New Mailing Address:**

**FEI Number:** 90-0638518      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FELTER, JEAN C  
305 GOODMAN AVE  
LAKE ALFRED, FL 33850 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: VP  
Name: BECKER, SUSAN L  
Address: 11941 OLD GRADE RD.  
City-St-Zip: POLK CITY, FL 33868 US

Title: TRES  
Name: KEMP, PATRICA F  
Address: 502 VICTORIA BLVD  
City-St-Zip: AUBURNDALE, FL 33823 US

Title: SEC  
Name: BECKER, SUSAN L  
Address: 11941 OLD GRADE RD.  
City-St-Zip: POLK CITY, FL 33868 US

Title: PRES  
Name: FELTER, JEAN C  
Address: 305 GOODMAN AVE  
City-St-Zip: LAKE ALFRED, FL 33850 US

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: JEAN C FELTER

PRES

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date