## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N10127

FILED Apr 14, 2009 Secretary of State

Entity Name: ARBOR LAKES HOMEOWNERS' ASSOCIATION, INC.

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

P O BOX 7301 10 ARBOR LAKE PARK DAYTONA BEACH, FL 32116 0RMOND BEACH, FL 32174

Current Mailing Address: New Mailing Address:

P O BOX 7301 % ATLANTIC SHORES MGT DAYTONA BEACH, FL 32116 3511 S. PENINSULA DRIVE PORT ORANGE, FL 32127

FEI Number: 59-2569141 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SOLOMON, KAREN

3611 S PENINSULA DR

PORT ORANGE, FL 32127 US

ROSKAMP, MARK

3511 S PENINSULA DR

PORT ORANGE, FL 32127 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: MARK ROSKAMP 04/14/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:SD () DeleteTitle:P (X) Change () AdditionName:SOLOMON, CHARLENEName:SOLOMON, CHARLENEAddress:10 ARBOR LAKE PARKAddress:10 ARBOR LAKE PARK

City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ORMOND BEACH, FL 32174

Title: D ( ) Delete Title: ( ) Change ( ) Addition Name: LARES, KATHRYN Name:

Address: 22 ARBOR LAKE PARK Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip:

Title: D () Delete Title: S (X) Change () Addition Name: AYRES, CAROLYN Name: AYRES, CAROLYN

Name: AYRES, CAROLYN
Address: 2 ARBORBUE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Name: AYRES, CAROLYN
Address: 2 ARBORBUE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete Title: T (X) Change () Addition

Name:BLACKBURN, MICHELLEName:BLACKBURN, MICHELLEAddress:19 ARTHUR LAKE PARKAddress:19 ARTHUR LAKE PARKCity-St-Zip:ORMOND BEACH, FL 32174City-St-Zip:ORMOND BEACH, FL 32174

Title: D ( ) Delete Title: VP (X) Change ( ) Addition

Name: SCHEIDEGGER, WILLIAM Name: SCHEIDEGGER, JUDY
Address: 2 ARBOR LAKE PARK Address: 12 ARBOR LAKE PARK
City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ORMOND BEACH, FL 32174

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: CHARLENE SOLOMON P 04/14/2009