

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11116

FILED
Jan 13, 2009
Secretary of State

Entity Name: LAKES EDUCATION/ACTION DRIVE, INC.

Current Principal Place of Business:

2 EAST LAKE HOWARD DRIVE
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 7607
LAKELAND, FL 338077607 US

New Mailing Address:

FEI Number: 59-2741774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, JOHNNA
2 EAST LAKE HOWARD DR.
WINTER HAVEN, FL 33881 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: VPD () Delete
Name: REIGNER, WALT
Address: PO BOX 5467
City-St-Zip: LAKELAND, FL 33807

Title: TD () Delete
Name: JENNINGS, THOMAS E.
Address: TWO EAST LAKE HOWARD DR
City-St-Zip: WINTER HAVEN, FL 338813153

Title: ED () Delete
Name: MARTINEZ, JOHNNA
Address: PO BOX 7607
City-St-Zip: LAKELAND, FL 33807

Title: SD () Delete
Name: OTHOSON, HOWARD R
Address: 17 ENCLAVE DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: PD () Delete
Name: BRITT, MICHAEL L
Address: 15 TERA LANE
City-St-Zip: WINTER HAVEN, FL 338801710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PORTERFIELD, CURTIS
Address: 4177 BEN DURRANCE ROAD
City-St-Zip: BARTOW, FL 33830

Title: TD (X) Change () Addition
Name: JENNINGS, THOMAS E
Address: TWO EAST LAKE HOWARD DR
City-St-Zip: WINTER HAVEN, FL 338813153

Title: ED (X) Change () Addition
Name: MARTINEZ, JOHNNA
Address: PO BOX 7607
City-St-Zip: LAKELAND, FL 338077607

Title: SD (X) Change () Addition
Name: HILL, CINDY
Address: 407 FAIRWAY AVENUE
City-St-Zip: LAKELAND, FL 33801

Title: VPD (X) Change () Addition
Name: SELSER, RACHELLE
Address: PO BOX 2277
City-St-Zip: WINTER HAVEN, FL 338832277

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: THOMAS E. JENNINGS

TD

01/13/2009

Electronic Signature of Signing Officer or Director

Date