

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15308

FILED
Apr 13, 2009
Secretary of State

Entity Name: LAKEVIEW CONDOMINIUM NO. 6 ASSOCIATION, INC.

Current Principal Place of Business:

C/O HARA MGMT. INC.
931 S SEMORAN BLVD, SUITE 214
WINTER PARK, FL 32792 US

New Principal Place of Business:

931 S. SEMORAN BLVD
SUITE #214
WINTER PARK, FL 32792 US

Current Mailing Address:

C/O HARA MGMT. INC.
931 S SEMORAN BLVD, SUITE 214
WINTER PARK, FL 32792 US

New Mailing Address:

931 S. SEMORAN BLVD
SUITE #214
WINTER PARK, FL 32792 US

FEI Number: 59-2624073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARA MANAGEMENT, INC.
931 S SEMORAN BLVD, SUITE 214
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

HARA MANAGEMENT, INC.
931 S SEMORAN BLVD
SUITE #214
WINTER PARK, FL 32792 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: ROBERT HARA

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SPIVEY, MALLORY
Address: 6031 SCOTCHWOOD GLEN #103
City-St-Zip: ORLANDO, FL 32822

Title: VPD () Delete
Name: HEIM, ROBERTA
Address: 6031 SCOTCHWOOD GLEN 106
City-St-Zip: ORLANDO, FL 32822

Title: STD () Delete
Name: SINGER, ALAN
Address: 6019 SCOTCHWOOD GLEN 202
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SPIVEY, MALLORY D
Address: 6031 SCOTCHWOOD GLEN #103
City-St-Zip: ORLANDO, FL 32822

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

Title: STD (X) Change () Addition
Name: SINGER, ALAN
Address: 801 BURR OAK DRIVE
City-St-Zip: OCOEE, FL 34761 31

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: MALLORY D. SPIVEY

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date