

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16302

FILED
Apr 29, 2009
Secretary of State

Entity Name: LAKE MARY COMMERCE CENTER ASSOCIATION, INC.

Current Principal Place of Business:

C/O FRANKHAM, JOSEPHINE S.
109 COMMERCE STREET, STE 1101
LAKE MARY, FL 32746 US

Current Mailing Address:

531 CODISCO WAY
SANFORD, FL 32771 US

New Principal Place of Business:

106 COMMERCE STREET
105
LAKE MARY, FL 32746 US

New Mailing Address:

106 COMMERCE STREET
LAKE MARY, FL 32746 US

FEI Number: 59-2869630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANKHAM, JOSEPHINE S
531 CODISCO WAY
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

LATHAN, LOUISE D D
106 COMMERCE STREET
105
LAKE MARY, FL 32746 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: LOUISE D LATHAN

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: DELLO RUSSO, ROBERT G.
Address: 531 CODISCO WAY
City-St-Zip: SANFORD, FL 32771

Title: SD (X) Delete
Name: FRANKHAM, JOSEPHINE
Address: 531 CODISCO WAY
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: ADHAV, NALINI
Address: 1398 BRISTOL PARK PLACE
City-St-Zip: HEATHROW, FL

Title: D () Delete
Name: LATHAN, LOUISE D.
Address: 106 COMMERCE ST #105
City-St-Zip: LAKE MARY, FL

Title: D () Delete
Name: EIFLER, LENHARD N.
Address: 4403 VINELAND RD #B-10
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: LOUISE D LATHAN

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date