

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22894

FILED
Jan 22, 2009
Secretary of State

Entity Name: LAKE PALMER CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

7650 SUMMERTREE LN
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

Current Mailing Address:

7650 SUMMERTREE LN
NEW PORT RICHEY, FL 34653 US

New Mailing Address:

FEI Number: 37-8098280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, MARILYN
7650 SUMMERTREE LANE
NEW PORT RICHEY, FL 34653 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: PD () Delete
Name: LEVITT, SHERRI
Address: 7535 BIRDWOOD COURT
City-St-Zip: NEW PORT RICHEY, FL 34653 PA

Title: V () Delete
Name: O'NEIL, TIM
Address: 7636 SUMMERTREE LN
City-St-Zip: NEW PORT RICHEY, FL 34653 PA

Title: ST () Delete
Name: HART, MARILYN
Address: 7630 SUMMERTREE LANE
City-St-Zip: NEW PORT RICHEY, FL 34653 PA

Title: D () Delete
Name: LEVITT, MICHAEL
Address: 7535 BIRDWOOD CT
City-St-Zip: NEW PORT RICHEY, FL 34653 PA

Title: D () Delete
Name: O'NEIL, MYRA
Address: 7636 SUMMERTREE LN
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D () Delete
Name: STRINGFELLOW, MARVIN
Address: 7700 SUMMERTEE LN
City-St-Zip: NEW PORT RICHEY, FL 34653 PA

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: D (X) Change () Addition
Name: O'NEIL, MAYRA
Address: 7636 SUMMERTREE LN
City-St-Zip: NEW PORT RICHEY, FL 34653

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: MARILYN HART

ST

01/22/2009

Electronic Signature of Signing Officer or Director

Date