

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27232

FILED
Apr 10, 2009
Secretary of State

Entity Name: EL LAGO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4524 GUN CLUB RD
#105
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

Current Mailing Address:

4524 GUN CLUB RD
#105
WEST PALM BEACH, FL 33415 US

New Mailing Address:

FEI Number: 65-0157610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMS PLUS INC
4524 GUN CLUB RD #105
WEST PALM BEACH, FL 33415 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: PTD () Delete
Name: MANSOUR, INEBORG
Address: 6144 SEVEN SPRINGS BLVD
City-St-Zip: GREEN ACRES, FL 33463

Title: VD () Delete
Name: JOHNSON, VALERIE
Address: 6102 SEVEN SPRINGS BLVD
City-St-Zip: GREENACRES, FL 33463

Title: SD () Delete
Name: DARVILLE, JEDINE SUE
Address: 6159 SEVENSPRINGS BLVD
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: NELLIS, NATALYA
Address: 6155 SEVENSPRINGS BLVD
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: WORTHAM, KERRY
Address: 6178 SEVEN SPRINGS BLVD.
City-St-Zip: GREENACRES, FL 33463

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: KIM SAUNDERS

RA

04/10/2009

Electronic Signature of Signing Officer or Director

Date