

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28263

FILED
Apr 03, 2009
Secretary of State

Entity Name: LAKE CHARLESTON MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

7014 CHARLESTON SHORES BLVD.
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

7014 CHARLESTON SHORES BLVD.
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 65-0119228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BACKER, KEITH
400 S DIXIE HWY STE 420
BOCA RATON, FL 33432 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: TD () Delete
Name: DOTOK, DONNA
Address: 7615 THORNLEE DR
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: GRATTAN, WAYNE
Address: 7332 OAKBORO DR
City-St-Zip: LAKE WORTH, FL 33467

Title: VPAS () Delete
Name: EGAN, CHARLES
Address: 7341 NAUTICA WY
City-St-Zip: LAKE WORTH, FL 33467

Title: P () Delete
Name: DELEO, SANDRA
Address: 7626 THORNIGE DR
City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: WORTHY, LISA
Address: 6856 HATTERAS DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: P (X) Change () Addition
Name: GRATTAN, WAYNE
Address: 7332 OAKBORO DR
City-St-Zip: LAKE WORTH, FL 33467

Title: S (X) Change () Addition
Name: EGAN, CHARLES
Address: 7341 NAUTICA WY
City-St-Zip: LAKE WORTH, FL 33467

Title: VP (X) Change () Addition
Name: DELEO, SANDRA
Address: 7626 THORNIGE DR
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Change (X) Addition
Name: KOTOK, DONNA
Address: 7615 THORNLEE DRIVE
City-St-Zip: LAKE WORTH, FL 33467

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: SHERI MCKENZIE

BKPR

04/03/2009

Electronic Signature of Signing Officer or Director

Date