2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28371

FILED Jan 06, 2010 Secretary of State

Entity Name: VILLAS OF LAKE ARBOR UNIT 6D CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O SEABORAD ARBORS MGMT SVC, INC 2189 CLEVELAND ST, STE 225 CLEARWATER, FL 33765

Current Mailing Address: New Mailing Address:

C/O SEABORAD ARBORS MGMT SVC, INC 2189 CLEVELAND ST, STE 225 CLEARWATER, FL 33765

FEI Number: 59-2987752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEIGHTON, LEN C/O SEABOARD ARBORS MGT SVC, INC 2189 CLEVELAND ST, STE 225 CLEARWATER, FL 33765 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: VPD

Name: HOWES, IRVIN

Address: 2020 LAKE VIEW DR #101 City-St-Zip: CLEARWATER, FL 33763

Title: STD

Name: KRATHWOHL, PHYLLIS
Address: 2020 LAKEVIEW DR #104
City-St-Zip: CLEARWATER, FL 33763

Title: PD

 Name:
 HOVLAND, CHRIS

 Address:
 2020 LAKEVIEW DR #203

 City-St-Zip:
 CLEARWATER, FL 33763

Title:

Name: MCEWAN, ANN

Address: 2020 LAKEVIEW DR #105 City-St-Zip: CLEARWATER, FL 33763

Title:

Name: KNOWLTON, ROBERTA
Address: 2020 LAKEVIEW DR #206
City-St-Zip: CLEARWATER, FL 33763

I hereby 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 all other like empowered.

SIGNATURE: CHRIS HOVLAND PD 01/06/2010