2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2010
Secretary of State

DOCUMENT# N28967

Entity Name: LAKEVIEW VILLAGE CONDOMINIUM NO. 12 ASSOCIATION, INC.

Current Principal Place of Business:

54 W. ILLIANA STREET
UNIT E
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 560698
ORLANDO, FL 328560698

New Mailing Address:

FEI Number: 59-2992311 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MITCHELL, TRACY L
54 W. ILLIANA STREET
UNIT E
ORLANDO, FL 32806 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
Name: BROWN, AMY
Address: 5980 SCOTCHWOOD GLEN, #108
City-St-Zip: SEBASTIAN, FL 32958

Title: SD
Name: ZHUGLI, TITIIANA
Address: 598 SCOTCHWOOD GLEN #1066
City-St-Zip: ORLANDO, FL 32822

Title: VPD
Name: MONTSINGER, CYNTHIA
Address: 5990 SCOTCHWOOD GLEN #102
City-St-Zip: ORLANDO, FL 32822

Title: T
Name: OBERNORF, DOUG
Address: 5980 SCOTCHWOOD GLEN #105
City-St-Zip: ORLANDO, FL 32822

Title: D
Name: MAVIS, CHRISTOPHER
Address: 133 STONEY POINT DRIVE
City-St-Zip: SEBASTIAN, FL 32958

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: AMY BROWN PD 03/12/2010

Electronic Signature of Signing Officer or Director — Date