

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30156

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** LEMON BAY ISLES PHASE 3-4 PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6100 TOUCAN DR  
ENGLEWOOD, FL 34224 US

**New Principal Place of Business:**

**Current Mailing Address:**

6100 TOUCAN DR  
ENGLEWOOD, FL 34224 US

**New Mailing Address:**

FEI Number: 65-0466385      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GUDE, TOM  
6085 SHEARWATER DR  
ENGLEWOOD, FL 34224 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: S D  
Name: HATHON, STAN  
Address: 8436 KINCLET DR  
City-St-Zip: ENGLEWOOD, FL 34224

Title: T D  
Name: LYONS, RICHARD  
Address: 8442 NIGHTHAWK DR.  
City-St-Zip: ENGLEWOOD, FL 34224

Title: D  
Name: GUDE, TOM  
Address: 6085 SHEARWATER DR  
City-St-Zip: ENGLEWOOD, FL 34224

Title: D  
Name: VENETTA, JOHN  
Address: 8370 KINGLET DR  
City-St-Zip: ENGLEWOOD, FL 34224

Title: P D  
Name: OLMSTED, BRUCE  
Address: 6083 TOUCAN DRIVE  
City-St-Zip: ENGLEWOOD, FL 34224

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: RICHARD LYONS

T D

01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date