

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31665

FILED
Apr 11, 2009
Secretary of State

Entity Name: LOST LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

140 LOST LAKE DR STE 1
COCOA, FL 32926 US

New Principal Place of Business:

Current Mailing Address:

140 LOST LAKE DR STE 1
COCOA, FL 32926 US

New Mailing Address:

FEI Number: 59-2950946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCULLOH, NEAL ESQ.
CLAYTON & MCCULLOH, ATTORNEYS AT LAW
1065 MAITLAND CENTER COMMONS BLVD.
MAITLAND, FL 32751 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 () Delete
Name: WILSON, BETTY J
Address: 118 AQUARIUS TERR
City-St-Zip: COCOA, FL 32926

Title: SD () Delete
Name: STROH, JOANN
Address: 122 AQUARIUS TERRACE
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: GLONDA, TITLER C
Address: 128 WOODSMILL BLVD.
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: BERNER, ALVIN C
Address: 125 LOST LAKES DR.
City-St-Zip: COCOA, FL 32926

Title: T () Delete
Name: SHELEY, PATRICIA
Address: 310 MERIDIAN RUN DR
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: WILSON, BETTY J
Address: 118 AQUARIUS TERR
City-St-Zip: COCOA, FL 32926

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: TAYLOR, RICHARD
Address: 145 WOODSMILL BLVD.
City-St-Zip: COCOA, FL 32926

Title: D (X) Change () Addition
Name: DALTON, JOSEPH
Address: 123 WOODSMILL BLVD.
City-St-Zip: COCOA, FL 32926

Title: D (X) Change () Addition
Name: MOORE, ROSEANN
Address: 155 WOODSMILL BLVD.
City-St-Zip: COCOA, FL 32926

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: BETTY J WILSON

PRES

04/11/2009

Electronic Signature of Signing Officer or Director

Date