2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32023

FILED Feb 12, 2009 Secretary of State

Entity Name: LAKEFIELD SOUTH HOMEOWNERS' ASSOCIATION, INC.

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

C/O CAPITAL REALTY ADVISORS C/O WELLINGTON MGMT., INC 600 SANDTREE DR 109 3461-B FAIRLANE FARMS ROAD WEST PALM BEACH, FL 33403 WELLINGTON, FL 33414

New Mailing Address: **Current Mailing Address:**

C/O CAPITAL REALTY ADVISORS C/O WELLINGTON MGMT., INC 3461-B FAIRLANE FARMS ROAD 600 SANDTREE DR 109 WEST PALM BEACH, FL 33403 US WELLINGTON, FL 33414

FEI Number: 65-0124992 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:

LADWIG, PATTI H ESQ WELLINGTON COUNTRY PLAZA 12765 W FOREST HILL BLVD STE 1317 WELLINGTON, FL 33414 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete EASTON, MICHELE EASTON, MICHELLE Name: Name:

15072 CORBY CRT Address: 15072 CORBY CRT Address: City-St-Zip: WEST PALM BEACH, FL 33414 City-St-Zip: WELLINGTON, FL 33414

Title: () Delete Title: (X) Change () Addition IACOFOLI, JOE Name: IACOFOLI, JOE Name: Address: 15096 CORBY COURT Address: 15096 CORBY COURT City-St-Zip: WEST PALM BEACH, FL 33414 City-St-Zip: WELLINGTON, FL 33414

Title: () Delete Title: (X) Change () Addition GONZALEZ, RICHARD GONZALEZ, RICHARD Name: Name:

2662 COUNTRY GOLF DR Address: Address: 2662 COUNTRY GOLF DR City-St-Zip: WEST PALM BEACH, FL 33414 City-St-Zip: WELLINGTON, FL 33414

Title: (X) Delete Title: () Change () Addition

DOHERTY, JOHN Name: Name: Address: 2640 NEATON CT Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip:

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: MICHELLE EASTON Ρ 02/12/2009