2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32165

FILED Jul 05, 2008 Secretary of State

Entity Name: LAKEVIEW TERRACE RESIDENTS ASSOCIATION INC.

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

331 RAINTREE DR
C/O LVT RESIDENTS ASSN.
ALTOONA, FL 32702 US

331 RAINTREE DRIVE
C/O LVT RESIDENTS ASSN.
ALTOONA, FL 32702 US

ALTOONA, FL 32702 US

Current Mailing Address: New Mailing Address:

331 RAINTREE DR
C/O LVT RESIDENTS ASSN.
ALTOONA, FL 32702 US
C/O LVT RESIDENTS ASSN.
ALTOONA, FL 32702 US
C/O LVT RESIDENTS ASSN.
ALTOONA, FL 32702 US

FEI Number: 59-2995123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

COXNELL, ETHEL M
67 LAKEVIEW TERRACE DR
T4
ALTOONA, FL 32702 US
HEBERT, NORMAN A
340 RAINTREE DRIVE
LL 340
ALTOONA, FL 32702 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: NORMAN A. HEBERT 07/05/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V () Delete Title: P (X) Change () Addition Name: RAYBURN, CHARLES Name: HEB ERT, NORMAN A

Address: 77 SUNSET DR. Address: 340 RAINTREE DRIVE
City-St-Zip: ALTOONA, FL 32702 City-St-Zip: ALTOONA, FL 32702

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

 Name:
 CHERONNY, RUTHANNE
 Name:
 MECKSTROTH, LOUISE

Address: 334 RAINTREE DR Address: 421 MAPLE TREE DRIVE
City-St-Zip: ALTOONA, FL 32702 City-St-Zip: ALTOONA, FL 32702

 Name:
 CORNWELL, ETHEL M
 Name:
 FINDLAY, GEORGE

 Address:
 67 LAKEVIEW TERRACE DR
 Address:
 317 RAINTREE DRIVE

 City-St-Zip:
 ALTOONA, FL 32702
 City-St-Zip:
 ALTOONA, FL 32702

Title: D () Delete Title: () Change () Addition

 Name:
 COURTRIGHT, HILTON
 Name:

 Address:
 401 MAPLE TREE DR
 Address:

 City-St-Zip:
 ALTOONA, FL 32702
 City-St-Zip:

 Name:
 HOFLING, CAROL
 Name:
 HOFLING, CAROL

 Address:
 431 MAPLETREE DR
 Address:
 431 MAPLETREE DR

 City-St-Zip:
 ALTOONA, FL 32702
 City-St-Zip:
 ALTOONA, FL 32702

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

 Name:
 COYLE, GEORGIA
 Name:
 CANFIELD, GEORGE

 Address:
 431 MAPLE TREE DR
 Address:
 431 MAPLE TREE DR

 City-St-Zip:
 ALTOONA, FL 32702
 City-St-Zip:
 ALTOONA, FL 32702

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: NORMAN A HEBERT P 07/05/2008