## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N32165

FILED Jan 14, 2012 Secretary of State

Entity Name: LAKEVIEW TERRACE RESIDENTS ASSOCIATION INC.

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

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

Current Mailing Address: New Mailing Address:

331 RAINTREE DRIVE 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 ( )

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

LVT RESIDENTS ASSN 331 RAINTREE DRIVE 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: PRES

Name: MARQUIS, WILLARD PRES Address: 431 MAPLE TREE DRIVE City-St-Zip: ALTOONA, FL 32702

Title: SEC

Name: REINBOLD, PASTY SEC
Address: 3115 LAKEVIEW TERACE DRIVE

City-St-Zip: ALTOONA, FL 32702

Title: TRES

Name: HEBERT, NORMAN A TREAS Address: 340 RAINTREE DRIVE City-St-Zip: ALTOONA, FL 32702

Title: VP

Name: SMITH, RUSSELL VP Address: 92 LAKEVIEW DRIVE City-St-Zip: ALTOONA, FL 32702

Title: DIR

Name: BEARD, MARY ELLEN

Address: 66 LAKEVIEW TERRACE DRIVE

City-St-Zip: ALTOONA, FL 32702

Title: DIR

Name: STORY, PHYLLIS

Address: 84 LAKEVIEW TERRACE DRIVE

City-St-Zip: ALTOONA, FL 32702

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: NORMAN HEBERT TREA 01/14/2012