2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N32269

Entity Name: LAKE VILLAGE HOME OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

400 LAKE DR
NOKOMIS, FL 34275 US

New Principal Place of Business:

Current Mailing Address:

400 LAKE DR
NOKOMIS, FL 34275 US

New Mailing Address:

FEI Number: 59-2353223 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KORP, WILLIAM R
HUNTINGTON PLAZA
240 S. PINEAPPLE
SARASOTA, FL 34236 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:	P	( ) Delete
Name:	JACKSON, MARGARET	
Address:	149 4TH ST. W.	
City-St-Zip:	NOKOMIS, FL 34275	
Title:	VP	( ) Delete
Name:	LOCK, TAMY	
Address:	75 6TH ST. E.	
City-St-Zip:	NOKOMIS, FL 34275	
Title:	T	( ) Delete
Name:	KNIGHT, JACQUELINE	
Address:	275 VILLAGE DRIVE	
City-St-Zip:	NOKOMIS, FL 34275	
Title:	D	( ) Delete
Name:	MARTIN, GEORGE	
Address:	129 5 ST. W. ,	
City-St-Zip:	NOKOMIS, FL 34275	
Title:	D	( ) Delete
Name:	ALLEN, P.J.	
Address:	109 CIRCLE DRIVE	
City-St-Zip:	NOKOMIS, FL 34275	
Title:	D	( ) Delete
Name:	PARTRIDGE, ANDREW	
Address:	197 3RD E.. ST	
City-St-Zip:	NOKOMIS, FL 34275	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	(X) Change ( ) Addition
Name:	LOCK, TAMY	
Address:	75 6TH ST. E	
City-St-Zip:	NOKOMIS, FL 34275	
Title:	VP	(X) Change ( ) Addition
Name:	MARTIN, GEORGE	
Address:	129 5TH W.	
City-St-Zip:	NOKOMIS, FL 34275	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	KULICH, PETER	
Address:	244 2ND ST. E.	
City-St-Zip:	NOKOMIS, FL 34275	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: JACQUELINE KNIGHT T 04/30/2009

Electronic Signature of Signing Officer or Director — Date