

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32773

FILED
Mar 31, 2012
Secretary of State

Entity Name: LAKE MARIAM HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

511 LAKE MARIAM TERRACE
WINTER HAVEN, FL 33884 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 7374
WINTER HAVEN, FL 338837374 US

New Mailing Address:

FEI Number: 59-3015519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OVALLE, TOM
511 LAKE MARIAM TERRACE
WINTER HAVEN, FL 33884 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
Name: OVALLE, TOM
Address: 511 LAKE MARIAM TERRACE
City-St-Zip: WINTER HAVEN, FL 33884

Title: VPD
Name: COFFMAN, TIM
Address: 117 LAKE MARIAM WAY
City-St-Zip: WINTER HAVEN, FL 33884

Title: TD
Name: GRAY, KATHRYN
Address: 124 LAKE MARIAM WAY
City-St-Zip: WINTER HAVEN, FL 33884

Title: SD
Name: GIPSON, VALERIE
Address: 317 LAKE MARIAM BLVD
City-St-Zip: WINTER HAVEN, FL 33884

Title: BD
Name: HARDY, FRANK
Address: 115 LAKE MARIAM WAY
City-St-Zip: WINTER HAVEN, FL 33884

Title: BD
Name: MCCOY, DON
Address: 514 LAKE MARIAM TERRACE
City-St-Zip: WINTER HAVEN, FL 33884

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: KATHRYN GRAY

TD

03/31/2012

Electronic Signature of Signing Officer or Director

Date