2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2010
Secretary of State

DOCUMENT# N32780

Entity Name: LAKE CHRISTINA ASSOCIATION, INC.

Current Principal Place of Business:

9806 SHAMOKIN LANE
PT. RICHEY, FL 34668 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1233
PORT RICHEY, FL 346731233 US

New Mailing Address:

FEI Number: 59-2997856 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CAMPBELL, JIM
9806 SHAMOKIN LANE
PT RICHEY, FL 34668 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: VD
Name: GREEN, LILLIAN
Address: 9736 SHAMOKIN LANE
City-St-Zip: PORT RICHEY, FL 34668 US

Title: P/D
Name: CAMPBELL, JIM
Address: 9806 SHAMOKIN LANE
City-St-Zip: PORT RICHEY, FL 34668 US

Title: D
Name: NILLER, JOHN
Address: 9516 LAKE CHRISTINA LA.
City-St-Zip: PORT RICHEY, FL 34668 US

Title: STD
Name: SABLICH, LILIANA
Address: 7635 VIENNA LANE
City-St-Zip: PT RICHEY, FL 34668 US

Title: D
Name: THOMPSON, LILLIAN
Address: 9753 LAKESIDE LANE
City-St-Zip: PT. RICHEY, FL 34668 US

Title: D
Name: LONG, JOE
Address: 9721 LAKESIDE LANE
City-St-Zip: PORT RICHEY, FL 34668 US

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: LILIANA SABLICH STD 02/19/2010
Electronic Signature of Signing Officer or Director Date