2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32840

FILED May 25, 2009 Secretary of State

Entity Name: LAKE GIBSON VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: P O BOX 92033 251 GRANITE DRIVE LAKELAND, FL 338042033 LAKELAND, FL 33809 **Current Mailing Address: New Mailing Address:** P O BOX 92033 LAKELAND, FL 338042033 FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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: KASSMAN, REYNA M 251 GRANÍTE DRIVE LAKELAND, FL 33809 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete JOHNSON, SEAN DURRANCE, TROY Name: Name: 203 GRANITE DRIVE Address: 259 GRANITE DRIVE Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33809 Title: () Delete Title: () Change () Addition Name: KASSMAN, REYNA Name: Address: 251 GRANITE DR Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: Title: () Delete Title: () Change () Addition WESTLEY, VALJEANNE Name: Name: 241 GRANITE DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: PETERS, NICOLE Name: SHUCK, SHARON 212 GRANITE DRIVE 928 TIMBERGREEN DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33809 Title: () Delete Title: () Change () Addition SHEA, PATRICIA Name: Name: 243 GRANITE DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: Title: () Delete Title: (X) Change () Addition THOMAS, MARGARET FOX. JOHNNA Name: Name: Address: 205 MARBLE LANE Address: 6608 SURFSIDE BLVD LAKELAND, FL 33809 APOLLO BEACH, FL 33809 City-St-Zip: 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: REYNA M KASSMAN T 05/25/2009