

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34211

FILED
Mar 18, 2009
Secretary of State

Entity Name: LAKESIDE GREEN HOMEOWNERS ASSOCIATION NO. 9, INC.

Current Principal Place of Business:

1928 LAKE WORTH RD
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

1928 LAKE WORTH RD
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 65-0188816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSOCIATED PROPERTY MANG.
1928 LAKE WORTH RD
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVE.
#400
WEST PALM BEACH, FL 33409 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: ED DICKER, ESQ.

03/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: COKOROGIANIS, CYNTHIA
Address: 4470 CAMROSE LN.
City-St-Zip: WEST PALM BEACH, FL 33417

Title: SD () Delete
Name: SHAPIRO, THEODORE
Address: 4461 CAMROSE LN.
City-St-Zip: WEST PALM BEACH, FL 33417

Title: TD () Delete
Name: STEPHENSON, CAROL
Address: 4390 CAMROSE LN.
City-St-Zip: WEST PALM BEACH, FL 33417

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LACON, PETER P
Address: 4441 CAMROSE LN.
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V (X) Change () Addition
Name: COKOROGIANIS, CYNTHIA V
Address: 4470 CAMROSE LN.
City-St-Zip: WEST PALM BEACH, FL 33417

Title: S (X) Change () Addition
Name: SHAPIRO, TED S
Address: 4361 CAMROSE LN.
City-St-Zip: WEST PALM BEACH, FL 33417

Title: T () Change (X) Addition
Name: STEPHENSON, CAROL T
Address: 4390 CAMROSE LN.
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Change (X) Addition
Name: LURIE, ARNOLD D
Address: 4380 CAMROSE LN.
City-St-Zip: WEST PALM BEACH, FL 33417

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: JOHN MATH, APM

AGT

03/18/2009

Electronic Signature of Signing Officer or Director

Date