## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N34316

FILED Jan 31, 2009 Secretary of State

Entity Name: THE LAKES AT BREAKERS WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	T LAKE DR RK SHORES, FL 33406	US		
Current Mailing Address:		New Mailing Address:		
	ST LAKE DR RK SHORES, FL 33406	US		
El Number	: 65-0168821 FEI Numb	er Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	Address of Current Re	gistered Agent:	Name and Address	of New Registered Agent:
	T LAKE DR RK SHORES, FL 33406	US		
	named entity submits thise of Florida.	s statement for the	purpose of changing its register	red office or registered agent, or both,
n the State	e of Florida.	s statement for the	purpose of changing its register	red office or registered agent, or both,
n the State	e of Florida.			red office or registered agent, or both,  Date
n the State	e of Florida. RE:		ent	
n the State	e of Florida.  RE: Electronic Signatur	re of Registered Ag	ent	Date
n the State SIGNATUF  DFFICERS  itle: ame: ddress:	e of Florida.  RE:  Electronic Signatur  S AND DIRECTORS:  P () Delete FELDMAN, STEPHEN 1266 BREAKERS WEST BL	re of Registered Ag VD. -11	ent  ADDITIONS/CHAN  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTOR
The State of the S	E of Florida.  RE:  Electronic Signatur  S AND DIRECTORS:  P () Delete FELDMAN, STEPHEN 1266 BREAKERS WEST BL WEST PALM BCH.,, FL 334  D () Delete MYERS, BECKY 1249 BREAKERS WEST BC	re of Registered Ag VD. 11 OULEVARD 8411	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTOR:  ( ) Change ( ) Addition

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: STEPHEN FELDMAN MR 01/31/2009