

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36695

FILED
Mar 13, 2009
Secretary of State

Entity Name: LAKE PIPPIN PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

811 PIPPIN DR
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

811 PIPPIN DR
NICEVILLE, FL 32578 US

New Mailing Address:

FEI Number: 59-3004043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARTANI, MYRNA L
811 PIPPIN DR
NICEVILLE, FL 32578 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: PDT () Delete
Name: WARNER, TOM
Address: 1027 CHOCTAWATCHEE
City-St-Zip: NICEVILLE, FL 32578

Title: VPT () Delete
Name: RANDLE, TONY
Address: 1013 LAKE DR
City-St-Zip: NICEVILLE, FL 32578

Title: STT () Delete
Name: PARTANI, MYRNA L
Address: 811 PIPPIN DR
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: RANDLE, TONY
Address: 1013 LAKE DR.
City-St-Zip: NICEVILLE, FL 32578

Title: VPT (X) Change () Addition
Name: BARBEE, GARY
Address: 953 E. CHOCTAWHATCHEE DR.
City-St-Zip: NICEVILLE, FL 32578

Title: STT (X) Change () Addition
Name: PARJANI, MYRNA L
Address: 811 PIPPIN DR
City-St-Zip: NICEVILLE, FL 32578

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: MYRNA PARJANI

STT

03/13/2009

Electronic Signature of Signing Officer or Director

Date