2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2009
Secretary of State

DOCUMENT# N38261

Entity Name: LAKE IDLEWILD ESTATES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4223 BAIR AVENUE
FRUITLAND PARK, FL 34731

New Principal Place of Business:

Current Mailing Address:

4223 BAIR AVENUE
FRUITLAND PARK, FL 34731

New Mailing Address:

FEI Number: 65-0199744 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAIR, VICKI S
4223 BAIR AVENUE
FRUITLAND PARK, FL 34731 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: M ( ) Delete
Name: BAIR, STANLEY
Address: 4223 BAIR AVE
City-St-Zip: FRUITLAND PARK, FL 34731

Title: SD ( ) Delete
Name: WALLACE, PATRICIA
Address: 4145 BAIR AVE
City-St-Zip: FRUITLAND PARK, FL 34731

Title: TD ( ) Delete
Name: BAIR, VICKI
Address: 4223 BAIR AVR
City-St-Zip: FRUITLAND PARK, FL 34731

Title: VP ( ) Delete
Name: CHRISTIANSEN, CHRIS
Address: 4103 BERGEN HALL RD
City-St-Zip: FRUITLAND PARK, FL 34731

Title: P ( ) Delete
Name: LORENZE, BILL
Address: 4038 BERGEN HALL RD
City-St-Zip: FRUITLAND PARK, FL 34731

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BAIR, RICHARD S
Address: 4223 BAIR AVE
City-St-Zip: FRUITLAND PARK, FL 34731

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: BAIR, VICKI S
Address: 4223 BAIR AVR
City-St-Zip: FRUITLAND PARK, FL 34731

Title: VPD (X) Change ( ) Addition
Name: CHRISTIANSEN, BRUCE W
Address: 4103 BERGEN HALL RD
City-St-Zip: FRUITLAND PARK, FL 34731

Title: PD (X) Change ( ) Addition
Name: LORENZE, WILLIAM K
Address: 4038 BERGEN HALL RD
City-St-Zip: FRUITLAND PARK, FL 34731

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: VICKI S BAIR TD 01/17/2009

Electronic Signature of Signing Officer or Director — Date