

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38261

FILED
Jan 06, 2010
Secretary of State

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:

4223 BAIR AVENUE
FRUITLAND PARK, FL 34731 US

Current Mailing Address:

4223 BAIR AVENUE
FRUITLAND PARK, FL 34731

New Mailing Address:

4223 BAIR AVENUE
FRUITLAND PARK, FL 34731 US

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: D
Name: BAIR, RICHARD S
Address: 4223 BAIR AVE
City-St-Zip: FRUITLAND PARK, FL 34731 US

Title: PD
Name: WALLACE, PATRICIA
Address: 4145 BAIR AVE
City-St-Zip: FRUITLAND PARK, FL 34731 US

Title: TD
Name: BAIR, VICKI S
Address: 4223 BAIR AVE
City-St-Zip: FRUITLAND PARK, FL 34731 US

Title: VPD
Name: NEWMAN, BARBARA
Address: 4132 BAIR AVE
City-St-Zip: FRUITLAND PARK, FL 34731 US

Title: SD
Name: MERRILL, GAIL
Address: 4144 BAIR AVE
City-St-Zip: FRUITLAND PARK, FL 34731 US

I hereby 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 all other like empowered.

SIGNATURE: VICKI S BAIR

TD

01/06/2010

Electronic Signature of Signing Officer or Director

Date