

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39196

FILED
Apr 04, 2012
Secretary of State

Entity Name: LIGHTHOUSE VILLAGE AT THE LANDINGS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

13611 MCGREGOR BLVD
SUITE 6
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

13611 MCGREGOR BLVD
SUITE 6
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 65-0226454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APEX MANAGEMENT SVCS OF LEE COUNTY, INC
13611 MCGREGOR BLVD
SUITE 6
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

MURRAY, GRACE J
13611 MCGREGOR BLVD
SUITE 6
FORT MYERS, FL 33919 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: GRACE J MURRAY

04/04/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: CREMIN, MARC
Address: 12960 BEACON COVE LANE
City-St-Zip: FORT MYERS, FL 33919 US

Title: ST
Name: WNUKOWSKI, ROBERT
Address: 12951 BEACON COVE LANE
City-St-Zip: FORT MYERS, FL 33919 US

Title: P
Name: LIPPEK, KARL
Address: 12984 BEACON COVE LANE
City-St-Zip: FORT MYERS, FL 33919 US

Title: D
Name: WHITE, ROBERT
Address: 9920 BEACON COVE COURT
City-St-Zip: FORT MYERS, FL 33919 US

Title: D
Name: GAGEN, GEOFF
Address: 12991 BEACON COVE LANE
City-St-Zip: FORT MYERS, FL 33919 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: KARL LIPPEK

PRES

04/04/2012

Electronic Signature of Signing Officer or Director

Date