

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39607

FILED
Apr 29, 2009
Secretary of State

Entity Name: LANSING ISLAND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

231 LANSING ISLAND DR.
INDIAN HARBOUR BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

231 LANSING ISLAND DR.
INDIAN HARBOUR BEACH, FL 32937

New Mailing Address:

FEI Number: 59-3045663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSLEY, CURTIS
1221 E NEW HAVEN AVE
MELBOURNE, FL 32901 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 () Delete
Name: DOWNS, TOM
Address: 231 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: P () Delete
Name: SCOTT, EDWARD
Address: 231 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: VP () Delete
Name: MURRAY, HOWARD
Address: 231 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: T () Delete
Name: VINU, PATEL
Address: 231 LI DRIVE
City-St-Zip: IHB, FL 32937

Title: S () Delete
Name: DELANEY, JOE
Address: 231 LI DRIVE
City-St-Zip: IHB, FL 32937

Title: D () Delete
Name: SHAPNO, ROBERT
Address: 231 LI DR
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ANTAB, VAUGHN
Address: 231 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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

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Name:
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Address:
City-St-Zip:

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

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: EDWARD SCOTT

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date