## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N40184

FILED Jan 16, 2009 Secretary of State

Entity Name: LAKE PLACID EAGLE'S NEST HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2680 ABELL RD

LAKE PLACID, FL 33852 US

Current Mailing Address: New Mailing Address:

P O BOX 811

LAKE PLACID, FL 33862 US

FEI Number: 58-2042780 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POLK, BEVERLEY 3004 ABELL RD

LAKE PLACID, FL 33852 US

**OFFICERS AND DIRECTORS:** 

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 CASH, RAY
 Name:
 CASH, RAY

 Address:
 2680 ABELL RD
 Address:
 2680 ABELL RD

 City-St-Zip:
 LAKE PLACID, FL
 33852

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 TOWNSEND, CAROLYN
 Name:

 Address:
 3036 ABELL ROAD
 Address:

 City-St-Zip:
 LAKE PLACID, FL 33852
 City-St-Zip:

 $\label{eq:title:sde} \mbox{Title:} \qquad \mbox{SD} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{SD} \qquad \mbox{(X) Change () Addition}$ 

 Name:
 POLK, BEVERLY
 Name:
 POLK, BEVERLEY D

 Address:
 3004 ABELL RD
 Address:
 3004 ABELL RD

 City-St-Zip:
 LAKE PLACID, FL 33852
 City-St-Zip:
 LAKE PLACID, FL 33852

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

 Name:
 JOHNSON, KARL L
 Name:
 JOHNSON, KARL L

 Address:
 2684 ANELL RD
 Address:
 2684 ABELL RD

 City-St-Zip:
 LAKE PLACID, FL 33852
 City-St-Zip:
 LAKE PLACID, FL 33852

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: BEVERLEY D. POLK SEC. 01/16/2009