

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43512

FILED
Aug 06, 2008
Secretary of State

Entity Name: LAKE GANDY SHORES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8250 SHAY LYNN COURT
ORLANDO, FL 32810 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 608011
ORLANDO, FL 328608011 US

New Mailing Address:

FEI Number: 59-3075101 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION INFORMATION SERVICES, INC.
1201 HAYES STREET
TALLAHASSEE, FL 32301 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: SCHULEIN, JUDY
Address: 8257 SHAY LYNN CT.
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: VAUGHAN, SUSAN
Address: 8257 SHAYLYN CT
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: ZAFFRAN, JANET
Address: 8224 SHAY LYNN CT
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: BEBBER, CAROL
Address: 8265 SHAY LYNN COURT
City-St-Zip: ORLANDO, FL 32810

Title: T () Delete
Name: FIDEL, MARK
Address: 8250 SHAY LYNN COURT
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
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: MARK FIDEL

TRE

08/06/2008

Electronic Signature of Signing Officer or Director

Date