

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44491

FILED
Apr 27, 2011
Secretary of State

Entity Name: LAKEPORT VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

%GUARDIAN PROPERTY MANAGEMENT
6704 LONE OAK BLVD
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

6704 LONE OAK BLVD
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 62-0243217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUARDIAN PROPERTY MANAGEMENT
6704 LONE OAK BLVD
NAPLES, FL 34109 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: BOB, GILLIGAN
Address: 2820 W. CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

Title: VP
Name: FOLEY, JIM
Address: 2924 W. CROWN POINTE BLVD.
City-St-Zip: NAPLES, FL 34112

Title: T
Name: LANIGAN, EDWARD
Address: 2896 WEST CROWH POINTE BOULEVARD
City-St-Zip: NAPLES, FL 34112

Title: D
Name: BALOUGH, JOSEPH
Address: 2840 W. CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

Title: D
Name: JUSZKO, JOHN
Address: 2912 W CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

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: BYRON ROSS

MGR

04/27/2011

Electronic Signature of Signing Officer or Director

Date