

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49718

FILED  
Feb 22, 2009  
Secretary of State

**Entity Name:** LAKE ELBERT COURT HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

814 LAKE ELBERT CT  
WINTER HAVEN, FL 33881

**New Principal Place of Business:**

**Current Mailing Address:**

814 LAKE ELBERT CT  
WINTER HAVEN, FL 33881 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

BRUCE, TONJES  
814 LAKE ELBERT CT  
WINTER HAVEN, FL 33881 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: P ( ) Delete  
Name: BRUCE, TONJES  
Address: 814 LAKE ELBERT CT  
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD ( ) Delete  
Name: MOORE, BETTY J  
Address: 816 LAKE ELBERT COURT  
City-St-Zip: WINTER HAVEN, FL 33881

Title: TD ( ) Delete  
Name: GILMORE, GENEVA  
Address: 826 LAKE ELBERT COURT NE  
City-St-Zip: WINTER HAVEN, FL 33881

Title: VD ( ) Delete  
Name: BARRY, WALKER  
Address: 821 LAKE ELBERT CT  
City-St-Zip: WINTER HAVEN, FL 33881

**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:

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: GENEVA A. GILMORE

TD

02/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date