

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50225

FILED
Mar 18, 2009
Secretary of State

Entity Name: LAKE GEORGE CRESCENT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

STATE RD. 309
GEORGETOWN, FL 31239

New Principal Place of Business:

Current Mailing Address:

905 PATRICIA LANE
JACKSONVILLE, FL 32250 US

New Mailing Address:

FEI Number: 59-3229543

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAKE GEORGE HOMEOWNERS ASSOC.
STATE RD. 309
GEORGETOWN, FL 31239 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: VPS () Delete
Name: DUKE, EVA
Address: 1223 PASTUER RD.
City-St-Zip: BARTOW, FL 33830

Title: T () Delete
Name: HAWKINBERRY, JEANETTE
Address: 905 PATRICIA LANE
City-St-Zip: JAX BEACH, FL 32250

Title: P/D () Delete
Name: HAWKINBERRY, GREG
Address: 905 PATRICIA LANE
City-St-Zip: JACSKONVILLE BEACH, FL 32250

Title: D () Delete
Name: JONES, J M
Address: 1535 CLIFFORD JONES ROAD
City-St-Zip: SCREVEN, GA 31560

Title: D () Delete
Name: DUKES, RICKY
Address: 1223 PASTUER RD.
City-St-Zip: BARTOW, FL 33830

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: GREGORY C. HAWKINBERRY

PRES

03/18/2009

Electronic Signature of Signing Officer or Director

Date