

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000469

FILED  
Apr 05, 2007  
Secretary of State

Entity Name: LAKEFRONT AREA PROPERTY OWNERS, INC.

## Current Principal Place of Business:

C/O MARY NEALE  
404 LAKESHORE BLVD.  
KISSIMMEE, FL 34741

## New Principal Place of Business:

C/O PATRICIA PATTON  
320 DAKIN AVE EAST  
KISSIMMEE, FL 34741

## Current Mailing Address:

C/O MARY NEALE  
404 LAKESHORE BLVD.  
KISSIMMEE, FL 34741

## New Mailing Address:

C/O PATRICIA PATTON  
320 DAKIN AVE. EAST  
KISSIMMEE, FL 34741

FEI Number: 59-3166737

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEALE, MARY  
404 LAKESHORE BLVD.  
KISSIMMEE, FL 34741 US

## Name and Address of New Registered Agent:

PATTON, PATRICIA  
320 DAKIN AVE EAST  
KISSIMMEE, FL 34741 US

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: PATRICIA PATTON

04/05/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NEALE, MARY  
Address: 404 LAKESHORE BLVD.  
City-St-Zip: KISSIMMEE, FL 34741

Title: TP ( ) Delete  
Name: KHAN, PATRICIA  
Address: 430 EAST DRURY  
City-St-Zip: KISSIMMEE, FL 34744

Title: VPT ( ) Delete  
Name: JACKSON, HEIDI  
Address: 420 LAKESHORE BLVD.  
City-St-Zip: KISSIMMEE, FL 34741

Title: TS ( ) Delete  
Name: PATTON, PATRICIA  
Address: 320 DAKIN AVE. S.  
City-St-Zip: KISSIMMEE, FL 34741

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TP (X) Change ( ) Addition  
Name: PERRY, CELESTE  
Address: 417 EAST DRURY AVE  
City-St-Zip: KISSIMMEE, FL 34744

Title: VPT (X) Change ( ) Addition  
Name: SIMONE, DAN  
Address: 424 LAKESHORE  
City-St-Zip: KISSIMMEE, FL 34741

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

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA PATTON

TS

04/05/2007

Electronic Signature of Signing Officer or Director

Date