

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000469

FILED  
Feb 26, 2010  
Secretary of State

Entity Name: LAKEFRONT AREA PROPERTY OWNERS, INC.

## Current Principal Place of Business:

C/O SHEILA HONEYCUTT  
314 LAKESHORE BLVD  
KISSIMMEE, FL 34741

## New Principal Place of Business:

C/O SHEILA HONEYCUTT  
316 LAKESHORE BLVD  
KISSIMMEE, FL 34741

## Current Mailing Address:

C/O SHEILA HONEYCUTT  
314 LAKESHORE BLVD  
KISSIMMEE, FL 34741

## New Mailing Address:

C/O SHEILA HONEYCUTT  
316 LAKESHORE BLVD  
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:

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

## Name and Address of New Registered Agent:

HONEYCUTT, SHEILA  
316 LAKESHORE BLVD  
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: SHEILA HONEYCUTT

02/26/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D  
Name: HUPERT, DAN  
Address: 424 LAKESHORE BLVD  
City-St-Zip: KISSIMMEE, FL 34741

Title: P  
Name: HONEYCUTT, SHEILA  
Address: 316 LAKESHORE BLVD  
City-St-Zip: KISSIMMEE, FL 34741

Title: VP  
Name: HUPERT, SIMONE  
Address: 424 LAKESHORE  
City-St-Zip: KISSIMMEE, FL 34741

Title: S/T  
Name: RAMIERIZ, SUSAN  
Address: 280 WILBARBER RD  
City-St-Zip: KISSIMMEE, FL 37444

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: SHEILA HONEYCUTT

P

02/26/2010

Electronic Signature of Signing Officer or Director

Date