

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003898

FILED
Mar 15, 2011
Secretary of State

Entity Name: LOST CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1122 AYRSHIRE
ORLANDO, FL 32803 US

New Principal Place of Business:

1122 AYRSHIRE STREET
ORLANDO, FL 32803 US

Current Mailing Address:

1122 AYRSHIRE
ORLANDO, FL 32803 US

New Mailing Address:

1122 AYRSHIRE STREET
ORLANDO, FL 32803 US

FEI Number: 59-3236076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAREY, JUDI A
112 AYRSHIRE ST
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

CAREY, JUDI A
1122 AYRSHIRE ST
ORLANDO, FL 32803 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:

03/15/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PERCLE, MARIANNE
Address: 3090 HEARTLEAF PLACE
City-St-Zip: WINTER PARK, FL 32792

Title: SD
Name: MILLER, TIM
Address: 1189 VALLEY CREEK RUN
City-St-Zip: WINTER PARK, FL 32792

Title: VPD
Name: ICKES, CHARLES
Address: 2804 DIKE RD.
City-St-Zip: WINTER PARK, FL 32792

Title: TD
Name: COLEMAN, DANIEL
Address: 1140 VALLEY CREEK RUN
City-St-Zip: WINTER PARK, FL 32792

Title: D
Name: SALT, GEORGE
Address: 1188 VALLEY CREEK RUN
City-St-Zip: WINTER PARK, FL 32792

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: MARIANNE PERCLE

PRES

03/15/2011

Electronic Signature of Signing Officer or Director

Date