

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004023

FILED
Apr 20, 2009
Secretary of State

Entity Name: NORTHLAKE DRAINAGE ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 428
MANGO, FL 33550 US

New Principal Place of Business:

11505 EAST BROADWAY
MANGO, FL 33550 US

Current Mailing Address:

P.O. BOX 428
MANGO, FL 33550 US

New Mailing Address:

FEI Number: 59-3240072 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JAEB, STEPHEN L
11505 E. BROADWAY
MANGO, FL 33550 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: DST () Delete
Name: JAEB, STEPHEN L
Address: 11505 E. BROADWAY
City-St-Zip: MANGO, FL 335500428

Title: PD () Delete
Name: HINE, JAMES
Address: 1203 TOWNSGATE COURT
City-St-Zip: PLANT CITY, FL 33566

Title: VD () Delete
Name: BROWN, STEVE
Address: 205 S HOOVER BLVD STE 305
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: HIGGINBOTHAM, RICHARD
Address: 5912 BREKENRIDGE PARKWAY STE A
City-St-Zip: TAMPA, FL 33610

Title: D () Delete
Name: MILAM, WILLIAM
Address: 300 TECHNOLOGY COURT
City-St-Zip: SMYRNA, GA 30082

Title: D () Delete
Name: JOSEPH, PANTE
Address: 1205 TOWNSGATE CRT
City-St-Zip: PLANT CITY, FL 33566

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
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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: STEPHEN L. JAEB

DST

04/20/2009

Electronic Signature of Signing Officer or Director

Date