

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005709

FILED
Apr 24, 2009
Secretary of State

Entity Name: LAUDERDALE LAKES COMMUNITY COUNCIL, INC.

Current Principal Place of Business:

3720 W OAKLAND PARK BLVD
LAUDERDALE LAKES, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

3720 W OAKLAND PARK BLVD
LAUDERDALE LAKES, FL 33311 US

New Mailing Address:

FEI Number: 65-0535225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, BEVERLY M
3720 W OAKLAND PARK BLVD
LAUDERDALE LAKES, FL 33319 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: MDT () Delete
Name: WILLIAMS, BEVERLY
Address: 3369 NW 21 ST
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: S () Delete
Name: DREXLER, ESTELLE
Address: 3720 W. OAKLAND PARK BLVD
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: D () Delete
Name: BAX, EULALEE
Address: 3670 NW 27 STREET
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: DM () Delete
Name: CHOICE, PONZELLE
Address: 2390 NW 34 TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33311

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:

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: HL COLEMAN

LEO

04/24/2009

Electronic Signature of Signing Officer or Director

Date