

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001643

FILED
Apr 26, 2004
Secretary of State**Entity Name:** THE LIONSPAW GRAND NEIGHBORHOOD OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1166 PELICAN BAY DR
DAYTONA BEACH, FL 32119 US**New Principal Place of Business:****Current Mailing Address:**1166 PELICAN BAY DR
DAYTONA BEACH, FL 32119 US**New Mailing Address:****FEI Number:** 59-3349981**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BARKIN, MICHELE
1166 PELICAN BAY DR
DAYTONA BCH, FL 32119 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:** VPD () Delete
Name: BURT, DORIAN
Address: 203 PINE CONE TRAIL
City-St-Zip: ORMOND BEACH, FL**Title:** PD () Delete
Name: MCMAHAN, RICHARD A
Address: 123 E. INDIANA AVENUE
City-St-Zip: DELAND, FL**Title:** DS () Delete
Name: BARKIN, MICHELE
Address: 1166 PELICAN BAY DR
City-St-Zip: DAYTONA BCH, FL 32119**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** VPD (X) Change () Addition
Name: BERNACCHI, BOB
Address: 40 LIONSPAW GRAND
City-St-Zip: DAYTONA BEACH, FL 32124**Title:** STD (X) Change () Addition
Name: MCMAHAN, RICHARD A
Address: 123 E. INDIANA AVENUE
City-St-Zip: DELAND, FL**Title:** PD (X) Change () Addition
Name: SCHERER, RON
Address: 35 LIONSPAW GRAND
City-St-Zip: DAYTONA BCH, FL 32124

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RON SCHERER

PD

04/26/2004

Electronic Signature of Signing Officer or Director

Date