2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002326

FILED Mar 13, 2011 Secretary of State

Entity Name: LAKE FRANCES ESTATES PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1150 SKYLINE DR. TAVARES, FL 32778

Current Mailing Address: New Mailing Address:

P O BOX 224

TAVARES, FL 32778 US

FEI Number: 59-3323906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHIPLEY LAW FIRM

131 WATERMAN AVENUE

MOUNT DORA, FL 32757 US

SHIPLEY LAW FIRM

20110 U. S. HIGHWAY 441

MOUNT DORA, FL 32757 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: 03/13/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: CHERNOSKY, FAY M Address: 1684 NASSAU CIRCLE City-St-Zip: TAVARES, FL 32778

Title: 2VPD

Name: BURKETT, BYRON
Address: 1154 CAPELLA DRIVE
City-St-Zip: TAVARES, FL 32778

Title: 1VPD

Name: BENNIS, HOWARD
Address: 1421 MOHAWK CIRCLE
City-St-Zip: TAVARES, FL 32778

Title: SD

Name: ERICKSON, CANDE Address: 1035 CAPELLA DRIVE City-St-Zip: TAVARES, FL 32778

Title: TD

Name: REEVES, ALFRED
Address: 1296 SKYLINE DRIVE
City-St-Zip: TAVARES, FL 32778

Title: ATD

Name: HAIGHT, GARY
Address: 1433 MOHAWK CIRCLE
City-St-Zip: TAVARES, FL 32778

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: FAY M CHERNOSKY P 03/13/2011