

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001648

FILED
Apr 03, 2009
Secretary of State

Entity Name: LAKEVIEW IN THE HILLS MOBILE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10515 US HIGHWAY 301
DADE CITY, FL 33525 US

New Principal Place of Business:

Current Mailing Address:

37908 LAKE GILBERT CIR
DADE CITY, FL 33525 US

New Mailing Address:

FEI Number: 59-3362490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRITTEN, VIRGINIA P
37908 LAKE GILBERT CIRCLE
DADE CITY, FL 33525 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: VD () Delete
Name: WHITNEY, PAUL A
Address: 37819 LAKE GILBERT CR.
City-St-Zip: DADE CITY, FL 33525

Title: SD () Delete
Name: WHITNEY, DOROTHY
Address: 37819 LAKE GILBERT CR.
City-St-Zip: DADE CITY, FL 33525

Title: T () Delete
Name: KERLEY, BETH
Address: 37916 LAKE GILBERT CIRCLE
City-St-Zip: DADE CITY, FL 33525

Title: RA () Delete
Name: BRITTEN, VIRGINIA
Address: 37908 LAKE GILBERT CIRCLE
City-St-Zip: DADE CITY, FL 33525

Title: P () Delete
Name: WRAY, LAURA A
Address: 37813 LAKE GILBERT CR.
City-St-Zip: DADE CITY, FL 33525

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: SNOOK, CHARLES P
Address: 37818 LAKE GILBERT CR.
City-St-Zip: DADE CITY, FL 33525

Title: SD (X) Change () Addition
Name: WHITNEY, DOROTHY
Address: 37807 LAKE GILBERT CR.
City-St-Zip: DADE CITY, FL 33525

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: WHITNEY, PAUL A
Address: 37807 LAKE GILBERT CR.
City-St-Zip: DADE CITY, FL 33525

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: PAUL A. WHITNEY

P

04/03/2009

Electronic Signature of Signing Officer or Director

Date