

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003928

FILED  
Jan 30, 2008  
Secretary of State

**Entity Name:** LAKE CLAIR PLACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

P.O. BOX 120463  
CLERMONT, FL 34712 US

**New Principal Place of Business:**

11627 CLAIR PLACE  
CLERMONT, FL 34711 US

**Current Mailing Address:**

P.O. BOX 120463  
CLERMONT, FL 34712 US

**New Mailing Address:**

**FEI Number:** 59-3406230      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CORRADINO, MICHAEL W  
11627 CLAIR PLACE  
CLERMONT, FL 34711 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: PD ( ) Delete  
Name: CORRADINO, MICHAEL W  
Address: 11627 CLAIR PLACE  
City-St-Zip: CLERMONT, FL 34711 US

Title: VD ( ) Delete  
Name: HOLLINGER, PEGGY  
Address: 10541 MIRA LAGO  
City-St-Zip: CLERMONT, FL 34711 US

Title: TD ( ) Delete  
Name: MILNES, RICHARD  
Address: 11634 CLAIR PLACE  
City-St-Zip: CLERMONT, FL 34711 US

Title: SD ( ) Delete  
Name: DELANEY, TIM  
Address: 11616 CLAIR PLACE  
City-St-Zip: CLERMONT, FL 34711 US

**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: SD (X) Change ( ) Addition  
Name: ORBAN, MICHON  
Address: 11709 CLAIR PLACE  
City-St-Zip: CLERMONT, FL 34711 US

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: MICHAEL W. CORRADINO

PD

01/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date