

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005160

FILED
Apr 30, 2009
Secretary of State

Entity Name: SOUTH LAKE RECREATION, INC.

Current Principal Place of Business:

1608 INDIAN SHORE DR.
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

1608 INDIAN SHORE DR.
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 65-0704127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEST, DAVID R
12123 ELBERT ST.
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: LUDICK, ALEX
Address: 1608 INDIAN SHORE DR.
City-St-Zip: CLERMONT, FL 34711

Title: SD () Delete
Name: GODZINSKI, DON
Address: 13301 VIA ROMA CIRCLE
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: WEST, DAVID
Address: 12123 ELBERT ST.
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: HOSKINSON, JIM
Address: 2226 CR 505
City-St-Zip: WILDWOOD, FL 34785

Title: D () Delete
Name: LYNN, MCKITRICK
Address: 13345 LOBLOLLY LANE
City-St-Zip: CLERMONT, FL 34711

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:

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: ALEX LUDICK

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date