

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002689

FILED  
Apr 12, 2008  
Secretary of State

**Entity Name:** LAKE WORTH PIONEERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1109 SOUTH CONGRESS AVE  
WEST PALM BEACH, FL 33406

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 21596  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

**FEI Number:** 91-1756159

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YEEND, JOHN  
1109 SOUTH CONGRESS AVE.  
WEST PALM BEACH, FL 33406 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: YEEND, LEA  
Address: 1109 SOUTH CONGRESS AVE  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: T,D ( ) Delete  
Name: YEEND, JOHN  
Address: 1109 SOUTH CONGRESS AVE  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VD ( ) Delete  
Name: MACOVIK, CHRISTIAN  
Address: P.O. BOX 21596  
City-St-Zip: WEST PALM BEACH, FL 33416

Title: SD ( ) Delete  
Name: OYER, III., HARVEY E  
Address: 800 CLAREMORE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VD ( ) Delete  
Name: THURBER, CAMERON  
Address: P.O. BOX 21596  
City-St-Zip: WEST PALM BEACH, FL 33416

Title: D ( ) Delete  
Name: SPALL, CINDI  
Address: P.O. BOX 21596  
City-St-Zip: WEST PALM BEACH, FL 33416

**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:

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: LEA YEEND

P

04/12/2008

Electronic Signature of Signing Officer or Director

Date