

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004347

FILED
Mar 09, 2011
Secretary of State

Entity Name: LYDIA ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O ERA DAN JONES & ASSOCIATES, INC.
1403-1 DUNN AVE.
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

Current Mailing Address:

C/O ERA DAN JONES & ASSOCIATES, INC.
1403-1 DUNN AVE.
JACKSONVILLE, FL 32218 US

New Mailing Address:

FEI Number: 59-3485252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERA DAN JONES & ASSOCIATES, INC.
1403-1 DUNN AVE.
JACKSONVILLE, FL 32218 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: VP/D
Name: ROBERSON, GLORIA
Address: 1403-1 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: P/D
Name: MCLEAN, JAMES
Address: 1403-1 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: SC/D
Name: BROWN, DAISY
Address: 1403-1 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: TD
Name: PURDY, CYNTHIA
Address: 1403-1 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: D
Name: MOLINA, NILSA
Address: 1403-1 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D
Name: PRIME, RUTHIE
Address: 1403-1 DUNN AVE
City-St-Zip: JACKSONVILLE, FL 32218

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: JAMES MCLEAN

PD

03/09/2011

Electronic Signature of Signing Officer or Director

_____ Date