

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004802

FILED
May 04, 2009
Secretary of State

Entity Name: LAKEMONT VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

656 LAKEMONT DR.
BRANDON, FL 33510 US

New Principal Place of Business:

671 LAKEMONT DR.
BRANDON, FL 33510 US

Current Mailing Address:

P.O. BOX 663
SEFFNER, FL 33583

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HICKMAN, DEEDRA
656 LAKEMONT DR.
BRANDON, FL 33510 US

Name and Address of New Registered Agent:

SIEGLER, MICHAEL
671 LAKEMONT DR.
BRANDON, FL 33510 US

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: MICHAEL SIEGLER

05/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIEGLER, MICHAEL
Address: 671 LAKEMONT DRIVE
City-St-Zip: BRANDON, FL 33510

Title: S () Delete
Name: UPDIKE, KATHI
Address: 657 LAKEMONT DRIVE
City-St-Zip: BRANDON, FL 33510

Title: T () Delete
Name: HICKMAN, DEEDRA
Address: 656 LAKEMONT DR.
City-St-Zip: BRANDON, FL 33510 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: BAUER, KEN
Address: 653 LAKEMONT DRIVE
City-St-Zip: BRANDON, FL 33510

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 SIEGLER

P

05/04/2009

Electronic Signature of Signing Officer or Director

Date