

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006689

FILED
Jul 27, 2009
Secretary of State

Entity Name: HOMEOWNERS ASSOCIATION OF LAGO MESA VILLAS, INC.

Current Principal Place of Business:

54 LAGO MESA WAY
KISSIMMEE, FL 34743

New Principal Place of Business:

Current Mailing Address:

54 LAGO MESA WAY
KISSIMMEE, FL 34743

New Mailing Address:

FEI Number: 59-3477007 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

NOGUEIRAS, MAGALY F
7 LAGO MESA WAY
KISSIMMEE, FL 34743 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: NOGUEIRAS, MAGALY F
Address: 7 LAGO MESA WAY
City-St-Zip: KISSIMMEE, FL 34743

Title: VTD () Delete
Name: PLAZA, SIGFREDO
Address: 23 LAGO MESA
City-St-Zip: KISSIMMEE, FL 34743

Title: SD () Delete
Name: RAMIREZ, MAGDALENA
Address: 53 LAGO MESA WAY
City-St-Zip: KISSIMMEE, FL 34743

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:

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: MAGALY F NOGUEIRAS

PD

07/27/2009

Electronic Signature of Signing Officer or Director

Date