2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2010
Secretary of State

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Entity Name: LAKERIDGE HARRISON ASSOCIATION, INC.

Current Principal Place of Business:

LAKERIDGE HARRISON ASSOCIATION, INC
142 LAKERIDGE DR
PANAMA CITY, FL 32405 US

New Principal Place of Business:

LAKERIDGE HARRISON ASSOCIATION, INC.
142 LAKERIDGE DR
PANAMA CITY, FL 32405 US

Current Mailing Address:

LAKERIDGE HARRISON ASSOCIATION, INC
142 LAKERIDGE DR
PANAMA CITY, FL 32405 US

New Mailing Address:

LAKERIDGE HARRISON ASSOCIATION, INC.
142 LAKERIDGE DR
PANAMA CITY, FL 32405 US

FEI Number: 59-3557476 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CULLEN, RICHARD F
121 LAKERIDGE DRIVE
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

ADAMS, DORIS
142 LAKERIDGE DRIVE
PANAMA CITY, FL 32405 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: DORIS ADAMS 04/22/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: FEATHERSTONE, DORIS
Address: 3418 HARRISON AVENUE
City-St-Zip: PANAMA CITY, FL 32405 US

Title: VP
Name: LOPEZ, CHARLES
Address: 3414 HARRISON AVENUE
City-St-Zip: PANAMA CITY, FL 32405 US

Title: DIR
Name: DUNKIN, ROBERT
Address: 230 LAKERIDGE DRIVE
City-St-Zip: PANAMA CITY, FL 32405 US

Title: DIR
Name: SPENCE, CINDY
Address: 119 LAKERIDGE DRIVE
City-St-Zip: PANAMA CITY, FL 32405 US

Title: DIR
Name: SCHILLING, MARY
Address: 3408 HARRISON AVENUE
City-St-Zip: PANAMA CITY, FL 32405 US

Title: SEC
Name: SPELL, GWYNELLE M
Address: 226 LAKERIDGE DRIVE
City-St-Zip: PANAMA CITY, FL 32405 US

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: DORIS ADAMS TREA 04/22/2010
Electronic Signature of Signing Officer or Director Date