2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001595

FILED Feb 13, 2009 Secretary of State

Entity Name: LAKE JOVITA HOMEOWNERS ASSOCIATION, INC. **New Principal Place of Business: Current Principal Place of Business:** 14651 21ST STREET DADE CTIY, FL 33523 **Current Mailing Address: New Mailing Address:** PO BOX 278 DADE CITY, FL 33526 FEI Number: 59-3711159 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUTCHINSON BROCK II, P 37837 MERIDIAN AVE SÚITE 314 DADE CTIY, FL 33523 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DEESE, RONNIE Name: Name: Address: PO BOX 278 Address: City-St-Zip: DADE CITY, FL 33526 City-St-Zip: Title: VD Title: () Delete () Change () Addition Name: BROWN, BILLY E Name: Address: 33623 BURKS ROAD Address: City-St-Zip: SAN ANTONIO, FL 33576 City-St-Zip: Title: STD () Delete Title: () Change () Addition WIELAND, THOMAS Name: Name: 12243 FOREST HIGHLANDS DR. Address: Address: City-St-Zip: DADE CITY, FL 33525 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: RONNIE L. DEESE PD 02/13/2009