

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003660

FILED
Mar 05, 2009
Secretary of State

Entity Name: THE MANORS AT LAKE BERKLEY RESORT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O SRK RESIDENTIAL COMMUNITIES
6220 S. ORANGE BLOSSOM TRAIL, STE 105
ORLANDO, FL 32809 US

New Principal Place of Business:

Current Mailing Address:

C/O SRK RESIDENTIAL COMMUNITIES
6220 S. ORANGE BLOSSOM TRAIL, STE 105
ORLANDO, FL 32809 US

New Mailing Address:

FEI Number: 59-3600122

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLOSTERMAN, STEPHEN R KLCAM
C/O SRK RESIDENTIAL COMMUNITIES
6220 S. ORANGE BLOSSOM TRAIL, STE 105
ORLANDO, FL 32809 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: VD () Delete
Name: ELLIS, GARY
Address: 43163 W. KIRKWOOD DR.
City-St-Zip: CLINTON TOWNSHIP, MI 48038 US

Title: STD () Delete
Name: PATTERSON, ELIZABETH
Address: 167 SANDHILLS ROAD MOUNT VERNON
City-St-Zip: GLASGOW, UK 6329NB UK

Title: D () Delete
Name: CURTIS, BRIDGET
Address: 985 LAKE BERKLEY DRIVE
City-St-Zip: KISSIMMEE, FL 34746 US

Title: PD () Delete
Name: TAKHAR, JANE
Address: THE PINES, COPSE LANE
City-St-Zip: HAYLING ISLAND, UK PO11 0QB UK

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:

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: STEPHEN KLOSTERMAN

RA

03/05/2009

Electronic Signature of Signing Officer or Director

Date