

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000003726

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** THE LAGRANGE COVE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

18045 US HIGHWAY 331 S  
FREEPORT, FL 32349

**New Principal Place of Business:**

**Current Mailing Address:**

18045 US HIGHWAY 331 S  
FREEPORT, FL 32349

**New Mailing Address:**

**FEI Number:** 59-3585665

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCGILL, ROBERT E III  
36008 EMERALD COAST PARKWAY STE 301  
DESTIN, FL 32541 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  
Name: PARIS, ALBERT E  
Address: 18045 US HWY 331 SOUTH  
City-St-Zip: FREEPORT, FL 32439

Title: STD  
Name: NELSON-PARIS, SHERRY L  
Address: 18045 US HWY 331 SOUTH  
City-St-Zip: FREEPORT, FL 32439

Title: D  
Name: ANDERSON, GERALD  
Address: PO BOX 4937  
City-St-Zip: SANTA ROSA BEACH, FL 32459 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: ALBERT E. PARIS

PD

04/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date