

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000087973

FILED
Apr 20, 2009
Secretary of State

Entity Name: LAKE REGION PROPERTY MANAGEMENT COMPANY

Current Principal Place of Business:

250 AVENUE K. SW
STE. 103
WINTER HAVEN, FL 33880

Current Mailing Address:

250 AVENUE K. SW
STE. 103
WINTER HAVEN, FL 33880

New Principal Place of Business:

250 AVENUE K. SW
STE. 100
WINTER HAVEN, FL 33880

New Mailing Address:

250 AVENUE K. SW
STE. 100
WINTER HAVEN, FL 33880

FEI Number: 59-3743498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRAUGHN, RICHARD E
255 MAGNOLIA AVE. SW
WINTER HAVEN, FL 33880 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CASSIDY, PETER E
Address: 250 AVENUE K, SW-STE 103
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: CASSIDY, MICHAEL
Address: 250 AVENUE K, SW-STE 103
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CASSIDY, PETER E
Address: 250 AVENUE K, SW-STE 100
City-St-Zip: WINTER HAVEN, FL 33880

Title: D (X) Change () Addition
Name: CASSIDY, MICHAEL
Address: 250 AVENUE K, SW-STE 100
City-St-Zip: WINTER HAVEN, FL 33880

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER E. CASSIDY

D

04/20/2009

Electronic Signature of Signing Officer or Director

Date