

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000042928

Entity Name: LAKE REALTY & ASSOCIATES, INC.

FILED
Oct 15, 2009
Secretary of State**Current Principal Place of Business:**4130 UNITED AVE.
MOUNT DORA, FL 32757**New Principal Place of Business:****Current Mailing Address:**4130 UNITED AVE.
MOUNT DORA, FL 32757 US**New Mailing Address:**4130 UNITED AVE.
MOUNT DORA, FL 32757

FEI Number: 59-3248977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:HOFMEISTER, CARLA D
4130 UNITED AVE.
MOUNT DORA, FL 32757 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: D () Delete
Name: HOFMEISTER, CARLA D
Address: 4130 UNITED AVE.
City-St-Zip: MOUNT DORA, FL 32757Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D () Change (X) Addition
Name: KARVE, CHAITRALI A
Address: 4130 UNITED AVE.
City-St-Zip: MOUNT DORA, FL 32757

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: CARLA D. HOFMEISTER

D

10/15/2009

Electronic Signature of Signing Officer or Director

Date