

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000815

FILED
Apr 24, 2007
Secretary of State

Entity Name: LAKEWOOD TERRACE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 530813
ST PETERBURG, FL 337430213

New Principal Place of Business:

4024 GROVE STREET SOUTH
ST PETERBURG, FL 33705 US

Current Mailing Address:

PO BOX 530813
ST PETERBURG, FL 337430213

New Mailing Address:

PO BOX 530813
ST PETERBURG, FL 337430213 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAKEFORD, ANN
4024 GROVE STREET SOUTH
ST PETERBURG, FL 33705 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: HARRIS, CALVIN
Address: 818-40TH AVENUE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: D () Delete
Name: BABCOCK, WHILHEMENIA
Address: 4025 GROVE STREET
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: T () Delete
Name: HICKS, KATHLYN
Address: 801 38TH AVE. S
City-St-Zip: SAINT PETERSBURG, FL 33705

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:

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: TREASURER/KATHLYN HICKS

T

04/24/2007

Electronic Signature of Signing Officer or Director

Date