

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004371

FILED  
Jan 13, 2011  
Secretary of State

**Entity Name:** LAKE JESUP WOODS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1750 WEST BROADWAY STREET - SUITE 222  
OVIDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

1750 WEST BROADWAY STREET - SUITE 222  
OVIDO, FL 32765

**New Mailing Address:**

**FEI Number:** 20-2897409

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COMMUNITY MANAGEMENT SPECIALISTS, INC.  
1750 WEST BROADWAY STREET - SUITE 222  
OVIDO, FL 32765 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: DP  
Name: KENNY, SUSAN  
Address: P.O. BOX 620368  
City-St-Zip: OVIDO, FL 32762

Title: DV  
Name: KRAMER, TAMIKA  
Address: P.O. BOX 620368  
City-St-Zip: OVIDO, FL 32762

Title: DST  
Name: MORSE, MATT  
Address: P.O. BOX 620368  
City-St-Zip: OVIDO, FL 32762

Title: D  
Name: SPENCER, JONATHAN  
Address: P.O. BOX 620368  
City-St-Zip: OVIDO, FL 32762

Title: DT  
Name: DEAL, CHERYL  
Address: P.O. BOX 620368  
City-St-Zip: OVIDO, FL 32762

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: DAVIS, KEVIN

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01/13/2011

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

\_\_\_\_\_  
Date