

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90399 019 ****61.25

DOCUMENT # N05138

1. Entity Name
HOMES AT LAWRENCE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**2994 JOG RD
B
GREENACRES, FL 33467**

Mailing Address
**2994 JOG RD
B
GREENACRES, FL 33467**

50008008



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03132006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
65-0035072

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GERRISH, SCOT A
2994 JOG RD, SUITE B
GREENACRES, FL 33467**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME STEPHENS, JAMES
STREET ADDRESS 70563 GLENWOOD DR
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE SD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Delete
NAME ALEXIS, OSNER
STREET ADDRESS 7347 PINEDALE DR
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Delete
NAME EVANS, JOHN
STREET ADDRESS 7350 WILLOW SPRING CIR S
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME BROWN, EASAMERA
STREET ADDRESS 7395 WILLOW SPRINGS CIRCLE EAST
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE PD ☒ Change ☐ Addition
NAME Augustus, Easamera Brown
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME MCNEALY, MARTHA
STREET ADDRESS 7419 WILLOW SPRINGS CIRCLE NORTH
CITY-ST-ZIP BOYNTON BEACH, FL 33436

TITLE VD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Stambaugh, Gary
STREET ADDRESS 7442 Pinedale Drive
CITY-ST-ZIP Boynton Beach, FL 33436

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Easamera Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/06

Date

(561)

Daytime Phone #