## **2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## FILED Apr 26, 2005 8:00 am Secretary of State

04-26-2005 90162 041 \*\*\*\*61.25

## **DOCUMENT # N33616**

1. Entity Name
LAKE OF THE WOODS OF JACARANDA HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business **LIGHTHOUSE MGMT & REALTY 16 CHURCH STREET** OSPREY, FL 34229

Mailing Address LIGHTHOUSE MGMT & REALTY 16 CHURCH STREET OSPREY, FL 34229

2. Principal P	ace of Business	3. Mailing Address					
PROGRESSI	UE COMMUNITY MOMITIN	MONT INC.					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		03282005	Chg-NP	CR2E037 (10/03)	
1801 GLENGARY STREET 1801 GLENGARY STREET							
City & State		City & State		4. FEI Numbe		<del>- 1 -</del>	plied For
SARAS		SARASOTA	-L	65-013	7024	<del></del>	t Applicable
2ip 34	231 USA	zip 34231	Country USA	5. Certificate	of Status Desired	□ \$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
MEINTS, V LAKE AT 1 16 CHURO OSPREY,	THE WOODS CHIST	Name PROGRESSIVE COMMUNITY MANAGEMEN Street Address (P.O. Box Number is Not Acceptable) Inc. I 801 GLEWGARY STREET					
			City	ARASOTA		FL Zip Cod	23/
the obligations of registered agent.							
SIGNATURE Signature, typed or prigitary farme of registered agent and filte if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  DATE							
ung maura, sylven sa pragnasian aspara asta asta asta a stylperatura. (neu i ⊏ registraren Agart styllesta arten astatung) DATE							
	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Camp Trust Fund Co		S5.00 May B Added to Fees	φ	lake check payable t ida Department of S	
10.	OFFICERS AND DIRE	CTORS	11.	ADDITIONS/CH	ANGES TO OFFICE	RS AND DIRECTORS IN	I 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[D D'ALESSIO, DENNIS 845 WOOD SORREL LN. VENICE, FL 34293	<b>∑</b> Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	SD CUSUMAN 557 LAURI VENICE, F	EL CHERR	-	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HAFER, STEVE 529 LAUREAL CHERRY LANE VENICE, FL 34293	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HAFER, 5- 830 WOOD	•	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD D'ALESSIO, DENNIS 845 WOOD SARREL LANE VENICE, FL 34293	Ø <b>X</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MARKEL, 1801 GLENG SARASOTA	JIM SARY STR	□ Change  ? EET  / 23/	<b>⊠</b> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MEINTS, WILLIAM 531 LAUREL CHERRY LANE VENICE, FL 34293	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	752 SILK		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WELTZER, BEVERLY 511 LAKE OF THE WOODS DRIVE VENICE, FL 34293	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WELTZIEN 862 DAHO			Addition
NAME STREET ADDRESS CITY-ST-ZIP	AS KEITH, J LLYOD 16 CHURCH STREET OSPREY, FL 34229	<b>⊠</b> Delete	NAME STREET ADDRESS CITY-ST-ZIP	AT SUTTON, 1801 GLEN SARASOTA	GARY 5.	reet 231	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 affect as if made under path; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR