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Mar 22, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000003587

1. Corporation Name
LAKWOOD OF AMELIA HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business 2215 EAST STATE ROAD 200 YULEE FL 32097 US	Mailing Address P.O. BOX 1967 YULEE FL 32097-1967 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	3. Date Incorporated or Qualified 07/20/1994	4. FEI Number 59-3334961 Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
POWELL, TERRELL J 2215 EAST STATE ROAD 200 YULEE FL 32097				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	STD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MOORMAN, KELLY M	1.2 NAME	John Silva
STREET ADDRESS	2108 WHITFIELD DRIVE	1.3 STREET ADDRESS	1517 Penbrook Dr
CITY-ST-ZIP	FERNANDINA BEACH FL	1.4 CITY-ST-ZIP	Fernandina Bch FL 32034
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENNEDY, WENDY	2.2 NAME	
STREET ADDRESS	2229 CAPTAIN KIDD DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	FERNANDINA BEACH FL	2.4 CITY-ST-ZIP	
TITLE	VPD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GABEHART, TOM	3.2 NAME	
STREET ADDRESS	2148 WHITFIELD DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	FERNANDINA BEACH FL	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SECRET, BOB	4.2 NAME	
STREET ADDRESS	2212 WILL HARDEE RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	FERNANDINA BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	P.D. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	INSERRA, CHRIS	5.2 NAME	
STREET ADDRESS	2201 CAPTAIN KIDD DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	FERNANDINA BEACH FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ DATE: 3/12/99 DAYTIME PHONE #: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (11/98)