

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006498

FILED
Apr 24, 2006
Secretary of State

Entity Name: LAKEWOOD AT THE LAKES AT THREE OAKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-3513402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGAEEMENT
265 AIRPORT RD S
NAPLES, FL 34104 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: PD () Delete
Name: ANDERSON, HENRY A
Address: 9100 PITTSBURGH BLVD.
City-St-Zip: FORT MYERS, FL 33912

Title: VPD () Delete
Name: MONSEES, WILLIAM
Address: 17571 STEPPING STONE DR.
City-St-Zip: FORT MYERS, FL 33912

Title: SD () Delete
Name: REDAVID, LYNN
Address: 9031 PITTSBURG BLVD.
City-St-Zip: FORT MYERS, FL 33912

Title: TD () Delete
Name: TACOMINI, ALFRED
Address: 9020 PITTSBURGH BLVD.
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: TINGLE, PHIL
Address: 9201 PITTSBURGH BLVD.
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: OLIVE, FRANK
Address: 17311 STEPPING STONE DRIVE
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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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 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: GLENN CARROLL

PRES

04/24/2006

Electronic Signature of Signing Officer or Director

Date