

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90413 016 ***150.00

DOCUMENT # P04000050416

1. Entity Name

LAKEVILLE VILLAGE PARTNERS, INC.



Principal Place of Business
211 N. RIDGEWOOD AVE
200
DAYTONA BCH FL 32114

Mailing Address
211 N. RIDGEWOOD AVE
200
DAYTONA BCH FL 32114



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 02-0719080

Applied For
Not Applicable

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

SAXON, BERNICE S ESQ.
201 E KENNEDY BLVD STE 600
TAMPA FL 33602

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Delete
NAME LEWIS, NORMA
STREET ADDRESS 211 N. RIDGEWOOD AVE
CITY- ST- ZIP DAYTONA BCH FL 32114

TITLE Chair ☐ Change ☒ Addition
NAME Sonya C Frazier
STREET ADDRESS 211 N. Ridgewood Ave
CITY- ST- ZIP Daytona Beach, FL 32114

TITLE VP ☐ Delete
NAME KELLY, CHRISTOPHER
STREET ADDRESS 211 N. RIDGEWOOD AVE
CITY- ST- ZIP DAYTONA BCH FL 32114

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

TITLE C ☐ Delete
NAME KRETZER, JOHN
STREET ADDRESS 211 N. RIDGEWOOD AVE
CITY- ST- ZIP DAYTONA BCH FL 32114

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

TITLE C ☐ Delete
NAME SAMPSON, LILLIAN D
STREET ADDRESS 211 N. RIDGEWOOD AVE
CITY- ST- ZIP DAYTONA BCH FL 32114

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

TITLE C ☐ Delete
NAME COURTNEY, ROBIN A
STREET ADDRESS 211 N. RIDGEWOOD AVE
CITY- ST- ZIP DAYTONA BCH FL 32114

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

TITLE S ☐ Delete
NAME GAMBLE, JOYOURS
STREET ADDRESS 211 N. RIDGEWOOD AVE
CITY- ST- ZIP DAYTONA BCH FL 32114

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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: Joyours Gamble

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/13/07 386-253-9313