

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05138

FILED
Mar 09, 2009
Secretary of State

Entity Name: HOMES AT LAWRENCE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2950 JOG RD
GREENACRES, FL 33467

New Principal Place of Business:

C/O 2950 JOG RD
GREENACRES, FL 33467

Current Mailing Address:

2950 JOG RD
GREENACRES, FL 33467

New Mailing Address:

C/O 2950 JOG RD
GREENACRES, FL 33467

FEI Number: 65-0035072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, EDWARD ESQ.
1818 AUSTRALIAN AVE S STE 400
W PALM BCH, FL 33409 US

Name and Address of New Registered Agent:

DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVENUE SOUTH
SUITE 400
W PALM BCH, FL 33409 US

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: SCOTT STOLOFF, ESQUIRE

03/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: STEPHENS, JAMES
Address: 7053 GLENWOOD DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: PD () Delete
Name: AUGUSTUS, EASAMERA B
Address: 7395 WILLOW SPRINGS CIRCLE EAST
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VD () Delete
Name: MCNEALY, MARTHA
Address: 7419 WILLOW SPRINGS CIRCLE NORTH
City-St-Zip: BOYNTON BEACH, FL 33436

Title: TD () Delete
Name: STAMBAUGH, GARY
Address: 7442 PINEDALE DR
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEPHENS, JAMES
Address: 7053 GLENWOOD DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: PTD (X) Change () Addition
Name: AUGUSTUS, EASAMERA B
Address: 7395 WILLOW SPRINGS CIRCLE EAST
City-St-Zip: BOYNTON BEACH, FL 33436

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

Title: SD (X) Change () Addition
Name: STAMBAUGH, GARY
Address: 7442 PINEDALE DR
City-St-Zip: BOYNTON BEACH, FL 33436

I hereby certify that the information supplied with this filing does not qualify 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: EASAMERA BROWN

PTD

03/09/2009

Electronic Signature of Signing Officer or Director

Date