

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05138

FILED  
Apr 12, 2011  
Secretary of State

**Entity Name:** HOMES AT LAWRENCE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O 2950 JOG RD  
GREENACRES, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 2950 JOG RD  
GREENACRES, FL 33467 US

**New Mailing Address:**

FEI Number: 65-0035072      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

CMC MANAGEMENT, INC.  
2950 JOG ROAD  
GREENACRES, FL 33467 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: SCOT A. GERRISH

04/12/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: BROWN, EASEMERA  
Address: 7395 WILLOW SPRINGS CIRCLE EAST  
City-St-Zip: BOYNTON BEACH, FL 33436 US

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

Title: SD  
Name: STAMBAUGH, GARY  
Address: 7442 PINEDALE DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: D  
Name: LYONS-NORFUS, PEARL  
Address: 7299 WILLOW SPRINGS CIRCLE WEST  
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: D  
Name: STUBBS, JUNE  
Address: 7396 WILLOW SPRINGS CIRCLE NORTH  
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: D  
Name: STEPHENS, JAMES  
Address: 7053 GLENWOOD DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33436 US

I hereby 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 all other like empowered.

SIGNATURE: EASEMERA BROWN

PTD

04/12/2011

Electronic Signature of Signing Officer or Director

Date