

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748812

**Entity Name:** LAKEWOOD SINGLE FAMILY HOMEOWNERS ASSOCIATION II, INC.**FILED**  
**Apr 22, 2021**  
**Secretary of State**  
**6530309926CC****Current Principal Place of Business:**2685 HORSESHOE DR. S #215  
NAPLES, FL 34104**Current Mailing Address:**2685 HORSESHOE DR. S #215  
NAPLES, FL 34104 US**FEI Number:** 65-0339505**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RESORT MANAGEMENT  
2685 HORSESHOE DR. S #215  
NAPLES, FL 34104 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:** RIGO ROIG

04/22/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRESIDENT, DIRECTOR  
Name JOKELA, RICK  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title VP, DIRECTOR  
Name CANTISANI, JOSEPH  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title TREASURER  
Name WALKER, JAMES  
Address 2180 WEST SR 434 STE 5000  
City-State-Zip: LONGWOOD FL 32779

Title SECRETARY  
Name JOANNE, MORRIS  
Address 2685 HORSESHOE DR. S #215  
City-State-Zip: NAPLES FL 34104

Title DIRECTOR  
Name DIPAOLO, SHARON  
Address 2685 HORSESHOE DR. S #215  
City-State-Zip: NAPLES FL 34104

Title DIRECTOR  
Name DIDONATO, MICHELE  
Address 2685 HORSESHOE DR. S #215  
City-State-Zip: NAPLES FL 34104

Title DIRECTOR  
Name PORTNER, SUZANNE  
Address 2685 HORSESHOE DR. S #215  
City-State-Zip: NAPLES FL 34104

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:** RICK JOKELA**PRESIDENT**

04/22/2021

Electronic Signature of Signing Officer/Director Detail

Date