

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000011172

**Entity Name:** LAKEVIEW VILLAS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5550 NW 111TH BLVD  
GAINESVILLE, FL 32653

**Current Mailing Address:**

P.O. BOX 310  
ALACHUA, FL 32616-0310 US

**FEI Number: 20-3382770**

**Certificate of Status Desired: No**

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

ASSOCIATION MANAGEMENT SOLUTIONS, LLC  
5550 NW 111TH BLVD.  
GAINESVILLE, FL 32653 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MCBRIDE, DON  
Address 327 TURKEY CREEK BLVD.  
City-State-Zip: ALACHUA FL 32615

Title S  
Name HOPE, FOREST  
Address 158 TURKEY CREEK BLVD.  
City-State-Zip: ALACHUA FL 32615

Title T  
Name CULLEY, H. DAVID  
Address 607 TIMBERS CROSSING  
City-State-Zip: LYNN HAVEN FL 32444

*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: DON MCBRIDE**

**PRESIDENT**

**04/04/2013**

Electronic Signature of Signing Officer/Director Detail

Date