

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09459

**FILED**  
**Apr 02, 2014**  
**Secretary of State**  
**CC2638444210**

**Entity Name:** LAKEWOOD AT THE CROSSINGS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

122 MIDDLE STREET  
LAKE MARY, FL 32746

**Current Mailing Address:**

122 MIDDLE STREET  
LAKE MARY, FL 32746 US

**FEI Number:** 59-2563263

**Certificate of Status Desired:** No

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

BONO AND ASSOCIATES, LLC  
122 MIDDLE STREET  
LAKE MARY, FL 32746 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:** MICHAEL L BONO

04/02/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name DONNELLY, JOHN  
Address 122 MIDDLE STREET  
City-State-Zip: LAKE MARY FL 32746

Title VPD  
Name MACIOSZEK, PENNY  
Address 122 MIDDLE STREET  
City-State-Zip: LAKE MARY FL 32746

Title SD  
Name BENJAMIN, LEANNE  
Address 122 MIDDLE STREET  
City-State-Zip: LAKE MARY FL 32746

Title TD  
Name MACIOSZEK, TOM  
Address 122 MIDDLE STREET  
City-State-Zip: LAKE MARY FL 32746

Title D  
Name STABLER, JOHN  
Address 122 MIDDLE STREET  
City-State-Zip: LAKE MARY FL 32746

*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:** JOHN DONNELLY

**PRESIDENT**

04/02/2014

Electronic Signature of Signing Officer/Director Detail

Date