

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20945

**FILED
Mar 22, 2013
Secretary of State
CC0484414382**

Entity Name: LAKE WOODBOURNE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SUITE # 12, PMB-177
9802 BAYMEADOWS ROAD
JACKSONVILLE, FL 32256

Current Mailing Address:

SUITE # 12, PMB-177
9802 BAYMEADOWS ROAD
JACKSONVILLE, FL 32256 US

FEI Number: 59-3025870

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROGERS, H. DAVID JR.
SUITE # 12, PMB-177
9802 BAYMEADOWS ROAD
JACKSONVILLE, FL 32256 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 D
Name LEIBOWITZ, STEVE
Address 4349 LAKE WOODBOURNE CIR., SO.
City-State-Zip: JACKSONVILLE FL 32217

Title DS
Name BUCKWALTER, MARIA
Address 8244 LAKE WOODBOURNE DR, W.
City-State-Zip: JACKSONVILLE FL 32217

Title P
Name VARGAS, NINOSHK
Address 4329 LAKE WOODBOURNE DR S
City-State-Zip: JACKSONVILLE FL 32217

Title VP
Name HARRIS, CHERYL
Address 4326 S. LAKE WOODBOURNE DR
City-State-Zip: JACKSONVILLE FL 32217

Title DT
Name SCHLESSINGER, EDWARD
Address 8273 LK. WOODBOURNE DR., EAST
City-State-Zip: JACKSONVILLE FL 32217

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: NINOSHK VARGAS

PRESIDENT

03/22/2013

Electronic Signature of Signing Officer/Director Detail Date