

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706025

FILED  
Jan 13, 2009  
Secretary of State

**Entity Name:** LAKEWOOD COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

140 LAKE OTIS RD.  
WINTER HAVEN, FL 33884 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2941  
WINTER HAVEN, FL 33883 US

**New Mailing Address:**

**FEI Number:** 59-2336744

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PUTNAM, THOMAS B E  
141 5TH STREET, NW SUITE 300  
WINTER HAVEN, FL 33881 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LATIMER, JEFF  
Address: 251 LAKE LINK ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: TD ( ) Delete  
Name: NEIDRINGHAUS, RICHARD  
Address: 140 LAKE OTIS ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: D ( ) Delete  
Name: MCINTOSH, LISA  
Address: 128 LAKE MARIAM RD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: D ( ) Delete  
Name: ADAMS, MEGAN  
Address: 145 LAKE MARIAM RD.  
City-St-Zip: WINTER HAVEN, FL 33884

Title: D ( ) Delete  
Name: HELMS, LARRY  
Address: 152 LAKE OTIS ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: PD ( ) Delete  
Name: WATSON, WILLIAM  
Address: 180 LAKE OTIS RD  
City-St-Zip: WINTER HAVEN, FL 33884

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD NEIDRINGHAUS

TD

01/13/2009

Electronic Signature of Signing Officer or Director

Date