

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 02, 2008 8:00 am
Secretary of State

06-02-2008 90001 029 ****70.00

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1. Entity Name

LAKES VILLAGE WEST CONDOMINIUM, INC.



Principal Place of Business

631-A MIDWAY DRIVE
OCALA FL 34472
US

Mailing Address

631-A MIDWAY DRIVE
OCALA FL 34472
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-1525239

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEMAND, REUBEN
653-A MIDWAY DR
OCALA FL 32672

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VD	☐ Delete
NAME	CASS, LESLIE	
STREET ADDRESS	661-A MIDWAY DR	
CITY- ST- ZIP	OCALA FL 34472	
TITLE	PD	☐ Delete
NAME	NELSON, NORMAN P	
STREET ADDRESS	649-B MIDWAY DR	
CITY- ST- ZIP	OCALA FL	
TITLE	TD	☒ Delete
NAME	KELLY, ROBERT J	
STREET ADDRESS	633-A MIDWAY DR.	
CITY- ST- ZIP	OCALA FL 34472	
TITLE	D	☐ Delete
NAME	RICKS, SUSAN	
STREET ADDRESS	617-A MIDWAY DRIVE	
CITY- ST- ZIP	OCALA FL 34472	
TITLE	D	☒ Delete
NAME	STAPLES, LUCILLE	
STREET ADDRESS	645-A MIDWAY DR	
CITY- ST- ZIP	OCALA FL	
TITLE	SD	☐ Delete
NAME	WELLER, SHERRI L	
STREET ADDRESS	633-B MIDWAY DR	
CITY- ST- ZIP	OCALA FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Change ☒ Addition
NAME	Keltner, Larry	
STREET ADDRESS	615-A Midway Dr	
CITY- ST- ZIP	OCALA, FL 34472	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	Williams, Kathleen R	
STREET ADDRESS	635A Midway Dr	
CITY- ST- ZIP	OCALA, FL 34472	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	Ryan, James E.	
STREET ADDRESS	687-A Midway Dr.	
CITY- ST- ZIP	OCALA, FL 34472	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Reuben Demand

RA

May 9 2008

352-687-3444