2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2009
Secretary of State

DOCUMENT# 724173

Entity Name: LAKES VILLAGE WEST CONDOMINIUM, INC.

Current Principal Place of Business:

631-A MIDWAY DRIVE
OCALA, FL 34472 US

New Principal Place of Business:

Current Mailing Address:

631-A MIDWAY DRIVE
OCALA, FL 34472 US

New Mailing Address:

FEI Number: 59-1525239 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DEMAND, REUBEN
653-A MIDWAY DR
OCALA, FL 32672 US

Name and Address of New Registered Agent:

CASS, LESLIE
661-A MIDWAY DR
OCALA, FL 34472 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: LESLIE CASS 05/12/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: CASS, LESLIE
Address: 661-A MIDWAY DR
City-St-Zip: OCALA, FL 34472

Title: PD ( ) Delete
Name: NELSON, NORMAN P
Address: 649-B MIDWAY DR
City-St-Zip: OCALA, FL

Title: D ( ) Delete
Name: RICKS, SUSAN
Address: 617-A MIDWAY DRIVE
City-St-Zip: OCALA, FL 34472

Title: SD ( ) Delete
Name: WELLER, SHERRI L
Address: 633-B MIDWAY DR
City-St-Zip: OCALA, FL

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CASS, LESLIE
Address: 661-A MIDWAY DR
City-St-Zip: OCALA, FL 34472

Title: VP (X) Change ( ) Addition
Name: NELSON, NORMAN P
Address: 649-B MIDWAY DR
City-St-Zip: OCALA, FL 34472

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

Title: TD (X) Change ( ) Addition
Name: WELLER, SHERRI L
Address: 633-B MIDWAY DR
City-St-Zip: OCALA, FL 34472

Title: SD ( ) Change (X) Addition
Name: WILLIAMS, KATHY
Address: 635-A MIDWAY DR.
City-St-Zip: OCALA, FL 34472

Title: D ( ) Change (X) Addition
Name: KELTNER, LARRY
Address: 615-A MIDWAY DR.
City-St-Zip: OCALA, FL 34472

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: LESLIE CASS PD 05/12/2009
Electronic Signature of Signing Officer or Director Date