

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752675

FILED  
Mar 21, 2007  
Secretary of State

Entity Name: LAKEWOOD ASSOCIATION, INC.

## Current Principal Place of Business:

2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 327795044 US

## New Principal Place of Business:

## Current Mailing Address:

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

## New Mailing Address:

FEI Number: 59-2017237      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, JAMES W JR.  
SENTRY MANAGEMENT INC.  
2180 WEST SR 434, SUITE 5000  
LONGWOOD, FL 32779 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: PD ( ) Delete  
Name: BURGESS, RALPH  
Address: PO BOX 715  
City-St-Zip: MOUNT DORA, FL 32756 US

Title: SD ( ) Delete  
Name: NICHOLS, MARY L  
Address: 110 N TREMAIN ST #214  
City-St-Zip: MT DORA, FL 32757

Title: VPD ( ) Delete  
Name: COLLIER, GREG  
Address: 3613 CACTUS LN  
City-St-Zip: MOUNT DORA, FL 32757 US

Title: D ( ) Delete  
Name: HOOD, SHERRI  
Address: PO BOX 1546  
City-St-Zip: SANDPOINT, ID 83864

Title: D ( ) Delete  
Name: JOHNSON, ROGER  
Address: 14702 JOHNSON PARK TRAIL  
City-St-Zip: DEERWOOD, MN 56444

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: BURGESS, VIRGINIA  
Address: 110 N TREMAIN ST #102  
City-St-Zip: MOUNT DORA, FL 32757 US

Title: PD (X) Change ( ) Addition  
Name: NETTLE, GORDON T  
Address: 110 N TREMAIN ST #206  
City-St-Zip: MOUNT DORA, FL 32757

Title: VPD (X) Change ( ) Addition  
Name: BEEBE, MERRELL  
Address: 110 N TREMAIN ST #109  
City-St-Zip: MOUNT DORA, FL 32757 US

Title: D (X) Change ( ) Addition  
Name: MODER, BOB  
Address: 1455 SKILES LN  
City-St-Zip: ARDEN HILLS, MN 55112

Title: D (X) Change ( ) Addition  
Name: ROBERTSON, ROBERT  
Address: 57 CREAMERY RD  
City-St-Zip: ASHFIELD, MA 01330

I hereby certify that the information supplied with this filing does not qualify for the 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: GORDON T NETTLE

PD

03/21/2007

Electronic Signature of Signing Officer or Director

Date