

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Apr 27, 2011
Secretary of State**

DOCUMENT# 754216

Entity Name: LAKEWOOD VILLAS VIII HOMEOWNERS ASSOCIATION, INC**Current Principal Place of Business:**187 FOREST LAKES BLVD
NAPLES, FL 34105 US**New Principal Place of Business:****Current Mailing Address:**187 FOREST LAKES BLVD
NAPLES, FL 34105 US**New Mailing Address:**

FEI Number: 59-2072300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:GRACEY, ROBERT T SR.
187 FOREST LAKES BLVD
NAPLES, FL 34105 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
Name: BAKER, RONALD
Address: 139 ROUND KEY CIRCLE
City-St-Zip: NAPLES, FL 34105Title: VPD
Name: PIENKOWSKI, CHARLES
Address: 4813 LAKEWOOD BLVD.
City-St-Zip: NAPLES, FL 34112Title: DST
Name: MACMORRIS, ROSEMARY
Address: 4645 LAKEWOOD BLVD
City-St-Zip: NAPLES, FL 34112Title: D
Name: ATCHELY, PATRICIA
Address: 191 ROUND KEY CIRCLE
City-St-Zip: NAPLES, FL 34112Title: AST
Name: GRACEY, ROBERT T SR.
Address: 187 FOREST LAKES BLVD.
City-St-Zip: NAPLES., FL 34105

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: RONALD BAKER

PRES

04/27/2011

Electronic Signature of Signing Officer or Director_____
Date