

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757392

FILED
Mar 30, 2006
Secretary of State

Entity Name: LAURELWOOD HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P&M PROPERTY MANAGEMENT
15660 SAN CARLOS BLVD. # 40
FORT MYERS, FL 33908 US

New Principal Place of Business:

BCH MANAGEMENT GROUP, INC.
1840 BOY SCOUT DRIVE, SUITE B
FORT MYERS, FL 33907 US

Current Mailing Address:

P&M PROPERTY MANAGEMENT
15660 SAN CARLOS BLVD. # 40
FORT MYERS, FL 33908 US

New Mailing Address:

BCH MANAGEMENT GROUP, INC.
P.O. BOX 60264
FORT MYERS, FL 33906 US

FEI Number: 59-2205364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAPP, PAUL L.
C/O P&M PROPERTY MANAGEMENT
15660 SAN CARLOS BLVD # 40
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

MOORE, DIANA L.
C/O BCH MANAGEMENT GROUP, INC.
1840 BOY SCOUT DRIVE, SUITE B
FORT MYERS, FL 33907 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: DIANA L MOORE

03/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CORVI, RENAE
Address: 10737 LEMON TREE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DT () Delete
Name: LAWYER, SANDY
Address: 10683 TULIP TREE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DVP () Delete
Name: LUNGE, SCOTT
Address: 1074 FIG TREE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DS () Delete
Name: STACK, MELISSA
Address: 19363 CORAL TREE
City-St-Zip: LEHIGH ACRES, FL 33936

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:

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: RENAE CORVI

P

03/30/2006

Electronic Signature of Signing Officer or Director

Date