

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757392

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: LAURELWOOD HOMEOWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

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

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

FEI Number: 59-2205364      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOORE, DIANA L  
C/O BCH MANAGEMENT GROUP, INC.  
1840 BOY SCOUT DRIVE, SUITE B  
FORT MYERS, FL 33907 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: DP ( ) Delete  
Name: STACK, MELISSA  
Address: 19363 CORAL TREE COURT  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DT ( ) Delete  
Name: HARRIS, JEWELINE  
Address: 19387 ORCHID TREE CT  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D ( ) Delete  
Name: AMEDURE, ANTHONY  
Address: 1069 TULIPTREE CT  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: DS ( ) Delete  
Name: HAUGER, CAROL  
Address: 10689 TULIPTREE CT.  
City-St-Zip: LEHIGH ACRES, FL 33936

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: AMEDURE, ANTHONY  
Address: 10694 TULIPTREE CT  
City-St-Zip: LEHIGH ACRES, FL 33936

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

Title: D ( ) Change (X) Addition  
Name: HAWTHORNE, SIMEON  
Address: 10714 FIGTREE COURT  
City-St-Zip: LEHIGH ACRES, FL 33936

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: DIANA MOORE

AGT

01/16/2009

Electronic Signature of Signing Officer or Director

Date