2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2012
Secretary of State

DOCUMENT# 762636

Entity Name: LAKEWOOD IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

307 WEST. LAKESHORE DRIVE
STARKE, FL 32091 US

New Principal Place of Business:

Current Mailing Address:

307 WEST. LAKESHORE DRIVE
STARKE, FL 32091 US

New Mailing Address:

FEI Number: 59-2300655 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORTHEY, JAMES E MR.
307 W. LAKESHORE DR.
STARKE, FL 32091 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: D
Name: BATTEN, DAVID
Address: 206 SOUTH LAKEWOOD DR
City-St-Zip: STARKE, FL 32091

Title: S
Name: NORRIS, VY
Address: 301 W. LAKESHORE DR.
City-St-Zip: STARKE, FL 32091

Title: P
Name: WHITEHEAD, ROBERT M
Address: 310 W. LAKESHORE DR.
City-St-Zip: STARKE, FL 32091

Title: VP
Name: JOHNS, MARGARET D
Address: 207 S. LAKEWOOD DR.
City-St-Zip: STARKE, FL 32091

Title: D
Name: BROWN, DOUG
Address: 409 W LAKESHORE DR
City-St-Zip: STARKE, FL 32091

Title: T
Name: NORTHEY, JAMES E T
Address: 307 W. LAKESHORE DRIVE
City-St-Zip: STARKE, FL 32091

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: JAMES E. NORTHEY TREA 01/04/2012

Electronic Signature of Signing Officer or Director Date