2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002393

FILED Mar 23, 2010 Secretary of State

Entity Name: LAKEFOREST AT ST. LUCIE WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1111 SE FED HWY 1111 SE FEDERAL HIGHWAY

SUITE 100 **STE 100**

STUART, FL 34994 STUART, FL 34994

Current Mailing Address: New Mailing Address:

1111 SE FED HWY 1111 SE FEDERAL **STE 100** SUITE 100

STUART, FL 34994 STUART, FL 34994

FEI Number: 65-1005844 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KRIVOK, JAMES N ESQ DICKER, KRIVOK & STOLOFF, P.A. 1818 AUSTRALIAN AVE S, SUÍTE 400 WEST PALM BEACH, FL 33409 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name: FALGIA, JANE

Address: 534 SW LAKE MANATEE WAY City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: SD

Name: WELLS, MARIA

Address: 884 SW ROCKY BAYOU TERR City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: TD

RUSSELLO, JAMES Name: Address: 470 SW TALQUIN LN

City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: PD

Name: MINENNA, JACK

354 SW LAKE FOREST WAY Address: City-St-Zip: PORT SAINT LUCIE, FL 34986

VPD Title:

GIONFRIDDO, FRANK Name: 639 SW LONG KEY COURT Address: PORT SAINT LUCIE, FL 34986 City-St-Zip:

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.

PRES SIGNATURE: JACK MINENNA 03/23/2010