

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # N00000005840 1. Entity Name THE LAKEWOOD RANCH COMMUNITY FUND, INC.	
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Principal Place of Business 6215 LORRAINE ROAD BRADENTON, FL 34202	Mailing Address 6215 LORRAINE ROAD BRADENTON, FL 34202
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01272006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

NAIMY, JOSEPH L ESQ
6320 VENTURE DRIVE
SUITE 104
BRADENTON, FL 34202

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

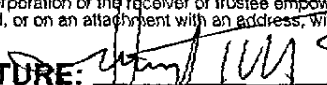
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MAR 13 2006 08:00 AM
SECRETARY OF STATE

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	CLARKE, JOHN
STREET ADDRESS	6215 LORRAINE ROAD
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	D
NAME	GRIFFITHS, LYN
STREET ADDRESS	7922 ROYAL BIRKDALE CIRCLE
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	D
NAME	NAJMY, JOSEPH L
STREET ADDRESS	1205 MANATEE AVE. WEST
CITY-ST-ZIP	BRADENTON, FL 34204
TITLE	D
NAME	DELANEY, ROBERT J
STREET ADDRESS	7613 DESERT INN WAY
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	D
NAME	KENNEDY, MICHAEL
STREET ADDRESS	6900 PROFESSIONAL PKWY EAST
CITY-ST-ZIP	SARASOTA, FL 34240
TITLE	P
NAME	FRANKLIN, JOSEPH
STREET ADDRESS	7163 WHITE MARCH CIRCLE
CITY-ST-ZIP	BRADENTON, FL 34202

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **JOSEPH L. NAJMY AS Director** 2/13/06 911-907-3216
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #