

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000006205

**FILED**  
**Jun 17, 2010**  
**Secretary of State**

**Entity Name:** THE LAKEWOOD COMMUNITY INC.

**Current Principal Place of Business:**

1827 STANFORD AVENUE  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

5165 ROLLINS AVENUE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

5165 ROLLINS AVENUE  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:** 04-3748298

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRAMMELL, MONTELLE A  
5165 ROLLINS AVENUE  
JACKSONVILLE, FLORIDA, FL 32207 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:** PRES  
**Name:** MUELLER, ERNST  
**Address:** 1827 STANFORD ROAD  
**City-St-Zip:** JACKSONVILLE, FL 32207

**Title:** S/T  
**Name:** TRAMMELL, MONTELLE A  
**Address:** 5165 ROLLINS AVENUE  
**City-St-Zip:** JACKSONVILLE, FL 32207

**Title:** D.  
**Name:** MUELLER, NANCY  
**Address:** 1827 STANFORD ROAD  
**City-St-Zip:** JACKSONVILLE, FL 32207

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:** MONTELLE A. TRAMMELL

SEC

06/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date