

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003322

FILED  
Apr 27, 2007  
Secretary of State

**Entity Name:** LAZYLAND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1717 12 AVE SOUTH LOT 61  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

**Current Mailing Address:**

1717 12 AVE SOUTH LOT 61  
LAKE WORTH, FL 33460

**New Mailing Address:**

**FEI Number:** 56-2326744

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GORDON, ANN  
1717 12 AVE SOUTH LOT 61  
LAKE WORTH, FL 33460 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: GORDON, ANN  
Address: 1717 12 AVE SOUTH LOT 61  
City-St-Zip: LAKE WORTH, FL 33460

Title: DV ( ) Delete  
Name: GREENWOOD, JOHN  
Address: 1717 12 AVE SOUTH LOT 94  
City-St-Zip: LAKE WORTH, FL 33460

Title: DS ( ) Delete  
Name: BOLDT, LAWRENCE  
Address: 1717 12 AVE SOUTH LOT K6  
City-St-Zip: LAKE WORTH, FL 33460

Title: DT ( ) Delete  
Name: MONGRUT, MARCO  
Address: 1717 12 AVE SOUTH LOT 25  
City-St-Zip: LAKE WORTH, FL 33460

Title: D ( ) Delete  
Name: KUNTZMAN, LARRY  
Address: 1717 12TH AVE SOUTH LOT 33  
City-St-Zip: LAKE WORTH, FL 33460

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: LAWRENCE BOLDT

DS

04/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date