

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 08, 2009
Secretary of State

DOCUMENT# N03000004340

Entity Name: LAKEWOOD VILLAGE RECREATION ASSOCIATION, INC.**Current Principal Place of Business:**BCH MANAGEMENT GROUP, INC.
1840 BOY SCOUT DRIVE,, SUITE B
FT. MYERS, FL 33907**New Principal Place of Business:**C/O ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD, SUITE 200
FORT MYERS, FL 33919**Current Mailing Address:**BCH MANAGEMENT GROUP, INC.
1840 BOY SCOUT DRIVE,, SUITE B
FT. MYERS, FL 33907**New Mailing Address:**C/O ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD, SUITE 200
FORT MYERS, FL 33919**FEI Number:** 20-1036752**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MOORE, DIANA
C/O BCH MANAGEMENT GROUP, INC.
1840 BOY SCOUT DRIVE, SUITE B
FT. MYERS, FL 22807 US**Name and Address of New Registered Agent:**ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD
SUITE 200
FORT MYERS, FL 33919 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: JOHN M. STROHM, AGENT

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: SANTOS, JOHN
Address: 8390 VILLAGE EDGE CIRCLE #1
City-St-Zip: FT. MYERS, FL 33919**Title:** VPD () Delete
Name: BELLOMO, JACK
Address: 54607 CARNATION STREET
City-St-Zip: MACOB TOWNSHIP, MI 48042**Title:** STD () Delete
Name: REEVES, JESSE
Address: 8440 VILLAGE EDGE CIRCLE #1
City-St-Zip: FT. MYERS, FL 33919**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: GRANT, KARIN
Address: 8471 VILLAGE EDGE CIRCLE #2
City-St-Zip: FORT MYERS, FL 33919**Title:** T/SD (X) Change () Addition
Name: BELLOMO, JACK
Address: 8390 VILLAGE EDGE CIRCLE #5
City-St-Zip: FORT MYERS, FL 33919**Title:** VP (X) Change () Addition
Name: KASEY, GAYLE
Address: 8260 VILLAGE EDGE CIRCLE #4
City-St-Zip: FORT MYERS, FL 33919

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: KARIN GRANT

PD

04/08/2009

Electronic Signature of Signing Officer or Director

Date