

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03348

FILED
May 29, 2008
Secretary of State

Entity Name: LAWRENCE WOODS PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6614 LAWRENCE WOODS CT.
LAKE WORTH, FL 33462 US

New Principal Place of Business:

6710 LAWRENCE WOODS CT.
LAKE WORTH, FL 33462 US

Current Mailing Address:

6614 LAWRENCE WOODS CT.
LAKE WORTH, FL 33462 US

New Mailing Address:

6710 LAWRENCE WOODS CT.
LAKE WORTH, FL 33462 US

FEI Number: 65-0075027 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BENEBY-MITCHELL, HEDDA
6614 LAWRENCE WOODS CT.
LAKE WORTH, FL 33462 US

Name and Address of New Registered Agent:

ASHLEY, STEVE
6710 LAWRENCE WOODS CT.
LAKE WORTH, FL 33462 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: STEVE ASHLEY

05/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HABERSTICK, BONNIE
Address: 6702 LAWRENCE WOODS CT
City-St-Zip: LAKE WORTH, FL 33462

Title: TS () Delete
Name: MITCHELL, HEDDA
Address: 6614 LAWRENCE WOODS CT.
City-St-Zip: LAKE WORTH, FL 33462 US

Title: VP () Delete
Name: SCHETER, FAY
Address: 6694 LAWRENCE WOODS CT
City-St-Zip: LAKE WORTH, FL 33462 US

Title: V (X) Delete
Name: DE LA SOVEIA, SERGIO
Address: 6590 LAWRENCE WOODS CT.
City-St-Zip: LAKE WORTH, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SERIO, TONY
Address: 6726 LAWRENCE WOODS CT
City-St-Zip: LAKE WORTH, FL 33462

Title: TS (X) Change () Addition
Name: ASHLEY, STEVE
Address: 6710 LAWRENCE WOODS CT.
City-St-Zip: LAKE WORTH, FL 33462 US

Title: VP (X) Change () Addition
Name: DAVIS, CATHY
Address: 6654 LAWRENCE WOODS CT
City-St-Zip: LAKE WORTH, FL 33462 US

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: STEVE ASHLEY

TS

05/29/2008

Electronic Signature of Signing Officer or Director

Date