

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000117

FILED  
Jan 16, 2009  
Secretary of State

**Entity Name:** LAKEWOOD VILLAGE SECTION III RESIDENTS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O DIANA MOORE, BCH MGMT GROUP, INC.  
1840 BOY SCOUT DRIVE, STE B  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DIANA MOORE, BCH MGMT GROUP, INC.  
1840 BOY SCOUT DRIVE, STE B  
FORT MYERS, FL 33907

**New Mailing Address:**

**FEI Number:** 20-1578756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C/O DIANA MOORE, BCH MGMT GROUP, INC.  
1840 BOY SCOUT DRIVE, STE B  
FORT MYERS, FL 33907 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: PD ( ) Delete  
Name: REEVES, JESSE  
Address: 8440 VILLAGE EDGE CIR, # 1  
City-St-Zip: FORT MYERS, FL 33919

Title: VPD ( ) Delete  
Name: DLESK, RANDALL  
Address: 355 HALL STREET  
City-St-Zip: BRIDGEPORT, OH 43912

Title: STD ( ) Delete  
Name: HAMILTON, THOMAS  
Address: 65 WHITEMORE COURT  
City-St-Zip: PAINESVILLE TWP, OH 44077

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

Title: VPD (X) Change ( ) Addition  
Name: REEVES, JESSE  
Address: 8440 VILLAGE EDGE CIR, # 1  
City-St-Zip: FORT MYERS, FL 33919

Title: STD (X) Change ( ) Addition  
Name: DLESK, RANDALL  
Address: 355 HALL STREET  
City-St-Zip: BRIDGEPORT, OH 43912

Title: PD (X) Change ( ) Addition  
Name: GRANT, KARIN  
Address: 8471 VILLAGE EDGE CIRCLE #2  
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: DIANA MOORE

AGT

01/16/2009

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

\_\_\_\_\_  
Date