

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36565

FILED  
Apr 06, 2009  
Secretary of State

**Entity Name:** THE LAKES AT ST. LUCIE WEST PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

% BAYSHORE ASSOC., MGMT  
430 NW LAKE WHITNEY PL  
PORT SAINT LUCIE, FL 34986 US

**New Principal Place of Business:**

**Current Mailing Address:**

% BAYSHORE ASSOC., MGMT  
P.O. BOX 880038  
PORT SAINT LUCIE, FL 34986 US

**New Mailing Address:**

FEI Number: 65-0172401

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORNETT, JANE ESQ  
WACKEEN, CORNETT & GOOGE PA  
401 EAST OSCEOLA STREET / 1ST FLOOR  
STUART, FL 34994 US

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

CORNETT, JANE ESQ  
WACKEEN, CORNETT & GOOGE PA  
401 EAST OSCEOLA STREET 1ST FLOOR  
STUART, FL 34994 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: JANE CORNETT

04/06/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: TURKEL, MARTIN  
Address: 1526-A NW AMHERST DR  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: TD ( ) Delete  
Name: NICKEL, RONALD  
Address: 1208 D NW SUN TERRACE CIR  
City-St-Zip: ST LUCIE WEST, FL 34986

Title: SD ( ) Delete  
Name: IMPRESSCIA, FRANK  
Address: 165 NW BENTLEY CIR  
City-St-Zip: PORT SAINT LUCIE, FL 34986

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

Title: D (X) Change ( ) Addition  
Name: AHWEIN, CHARLES  
Address: 1210 NW SUN TERRACE CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: D (X) Change ( ) Addition  
Name: DOUGHERTY, DARLENE  
Address: 1210 NW SUN TERRACE CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: D (X) Change ( ) Addition  
Name: ROGERS, OLGA  
Address: 1210 NW SUN TERRACE CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: DARLENE DOUGHERTY

D

04/06/2009

Electronic Signature of Signing Officer or Director

Date