

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N48428 (9)
1. Corporation Name
HOMEOWNERS' ASSOCIATION OF LAKEWOOD VILLAGE, INC



Principal Place of Business Mailing Address
1455 90TH AVE. #319 VERO BEACH FL 32966 **1455 90TH AVE. #319 VERO BEACH FL 32966**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 1455 90th Ave.		26 1455 90th Ave		04/17/1992		04/19/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22 Lot A23		27 Lot A23		65-0328949		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23 Vero Beach, Florida		28 Vero Beach, Florida		6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
Zip		Country		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		☐ Yes ☐ No	
24 32966		25 U.S.A.		29 32966		30 U.S.A.	

9. Name and Address of Current Registered Agent

RICHARDS, BECKY L
1455 90TH AVE
SUITE 319
VERO BEACH FL 32966

10. Name and Address of New Registered Agent

81 Name **FRANCIS: John**
82 Street Address (P.O. Box Number is Not Acceptable) **1455 90th Ave, Lot A48**
83
84 City **Vero Beach** **FL** 85 Zip Code **32966**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **John Francis** **March 5, 1996**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ☒ DELETE	1.1 TITLE	DP ☒ Change ☐ Addition
NAME	UROUHART, ALAN	1.2 NAME	SCHERRER, Eleanor
STREET ADDRESS	1455 90TH AVE LOT 240	1.3 STREET ADDRESS	1455 90th Ave Lot A23
CITY-ST-ZIP	VERO BEACH FL	1.4 CITY-ST-ZIP	VERO BEACH, FL ☒ Change ☐ Addition
TITLE	DVP ☐ DELETE	2.1 TITLE	
NAME	SCHERRER, ELEANOR	2.2 NAME	
STREET ADDRESS	1455 90TH AVE LOT A-23	2.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	2.4 CITY-ST-ZIP	
TITLE	DT ☒ DELETE	3.1 TITLE	DT ☒ Change ☐ Addition
NAME	RICHARDS, BECKY	3.2 NAME	FRANCIS, John
STREET ADDRESS	1455 90TH AVE, LOT 319	3.3 STREET ADDRESS	1455 90th ave Lot A48 Vero Beach
CITY-ST-ZIP	VERO BEACH FL	3.4 CITY-ST-ZIP	
TITLE	DS ☒ DELETE	4.1 TITLE	DS ☒ Change ☐ Addition
NAME	MIGLIORE, SUSAN	4.2 NAME	SHEPKE, Nancy
STREET ADDRESS	1455 90TH AVE LOT 318	4.3 STREET ADDRESS	1455 90th Ave Lot A5, Vero Beach
CITY-ST-ZIP	VERO BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	D ☒ Change ☐ Addition
NAME	FRANCIS, JOHN	5.2 NAME	Emard, Norman
STREET ADDRESS	1455 90TH AVE LOT A-48	5.3 STREET ADDRESS	1455 90th Ave, Lot 109, Vero Beach
CITY-ST-ZIP	VERO BEACH FL	5.4 CITY-ST-ZIP	
TITLE	D ☒ DELETE	6.1 TITLE	D ☒ Change ☐ Addition
NAME	FERRAIUOLO, RON	6.2 NAME	Schlough, Arthur
STREET ADDRESS	1455 90TH AVE LOT A-7	6.3 STREET ADDRESS	1455 90th Ave Lot 133, Vero Beach
CITY-ST-ZIP	VERO BEACH FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **John Francis** **March 5, 1996**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)