

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005652

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: LEAWOOD LAKES HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

7400 TAMIAMI TRAIL NORTH  
SUITE 101  
NAPLES, FL 34108 US

## New Principal Place of Business:

3701 TAMIAMI TRAIL N, 3RD FLOOR  
NAPLES, FL 34103 US

## Current Mailing Address:

7400 TAMIAMI TRAIL NORTH  
SUITE 101  
NAPLES, FL 34108 US

## New Mailing Address:

3701 TAMIAMI TRAIL N, 3RD FLOOR  
NAPLES, FL 34103 US

FEI Number: 65-1143308

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COMPASS GROUP PROPERTY MGMT  
7400 TAMIAMI TRAIL NORTH  
SUITE 101  
NAPLES, FL 34108 US

## Name and Address of New Registered Agent:

COMPASS GROUP PROPERTY MGMT  
3701 TAMIAMI TRAIL N, 3RD FLOOR  
NAPLES, FL 34103 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: JEFF MITCHELL

04/30/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HAMILTON, DAN PRES.  
Address: 441 LEAWOOD CIRCLE  
City-St-Zip: NAPLES, FL 34104

Title: VP ( ) Delete  
Name: CADY, ROBERT VP  
Address: 450 LEAWOOD CIRCLE  
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Delete  
Name: HALL, MATT  
Address: 473 LEAWOOD CIRCLE  
City-St-Zip: NAPLES, FL 34104

Title: S (X) Delete  
Name: SUTLOVICH, ROSEANN SEC  
Address: 505 LEAWOOD CIRCLE  
City-St-Zip: NAPLES, FL 34104

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: HAMILTON, DANIEL  
Address: 441 LEAWOOD CIRCLE  
City-St-Zip: NAPLES, FL 34104

Title: P (X) Change ( ) Addition  
Name: ESTES, MICHELLE  
Address: 123 LEAWOOD CIRCLE  
City-St-Zip: NAPLES, FL 34104

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DAN HAMILTON

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date