2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005751

FILED May 11, 2007 Secretary of State

Entity Name: LAKEWOOD AT MEADOW WOODS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
NE-AN SERVICES, INC. 13801 TIMBERLAND DR # 102 ORLANDO, FL 32824 US		NE-AN SERVICES, INC. 13864 TIMBERBROOKE DR. #101 ORLANDO, FL 32824 US	
Current Mailing Address:		New Mailing Address:	
P.O. BOX 7	ERVICES, INC. 770446 ₁ ., FL 32877 US		
FEI Number:	•••	ımber Not Appl	
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: Name and Address of New Registered Agent:			
NE-AN SERVICES 13801 TIMBERLAND DR. 102 ORLANDO, FL 32824 US		NE-AN SERVICES 13864 TIMBERBROOKE DR. 101 ORLANDO, FL 32824 US	
The above in the State	named entity submits this statement for the purpose of Florida.	of changing i	its registered office or registered agent, or both,
SIGNATURE:		05/11/2007	
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () Delete KERR, BRUCE 13917 TIMBERLAND DR. # 203 ORLANDO, FL 32824 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () Delete SANTINI, IRIS 13829 TIMBERLAND DR., #204 ORLANDO, FL 32824 US	Title: Name: Address: City-St-Zip:	TD (X) Change () Addition BATCHELOR, ROBERT 13814 TIMBERBROOKE DR. #201 ORLANDO, FL 32824 US
Title: Name: Address: City-St-Zip:	D () Delete NAGY, BARBARA 13828 TIMBERBROOKE DR # 201 ORLANDO, FL 32824 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPD () Delete GLOSSENGER, BETTY 13864 TIMBERBROOKE DER #103 ORLANDO, FL 32824 US	Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition SHIELDS, LEONARD 13945 TIMBERLAND DER #202 ORLANDO, FL 32824 US
Title: Name: Address: City-St-Zip:	SD () Delete CANDIDA, MERCADO 13800 TIMBERBROOKE DR #202 ORLANDO, FL 32824 US	Title: Name: Address: City-St-Zip:	() Change () Addition

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: NEIL BAILEY RA 05/11/2007