

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 06, 2009
Secretary of State

DOCUMENT# N97000000297

Entity Name: THE LAKES OF NORTHWOOD HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2002 N. LOIS AVE
SUITE 507
TAMPA, FL 33607**New Principal Place of Business:****Current Mailing Address:**2002 N. LOIS AVE
SUITE 507
TAMPA, FL 33607**New Mailing Address:****FEI Number:** 59-3443328**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COMMUNITY ASSOCIATION MANAGEMENT SVCS
2002 N. LOIS AVE
SUITE 507
TAMPA, FL 33607 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: P () Delete
Name: WALTER, JUDY
Address: 1411 YARDLY DR
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: VP () Delete
Name: BROTT, LOIS
Address: 27742 GROVE POINT CT
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: S () Delete
Name: NICHOLS, DAVE
Address: 1345 YARDLY DR
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: T () Delete
Name: FARMER, JAMES
Address: 1645 FENNSBURY CT
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D () Delete
Name: BROTT, JACK
Address: 27742 GROVE POINT CT
City-St-Zip: WESLEY CHAPEL, FL 33544

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: T (X) Change () Addition
Name: BURTNETT, VIRGINIA
Address: 1123 BIG CREEK DR
City-St-Zip: WESLEY CHAPEL, FL 33544

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: BRIAN K. LAMB

CEO

10/06/2009

Electronic Signature of Signing Officer or Director

Date