

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000866

FILED  
Mar 22, 2010  
Secretary of State

**Entity Name:** THE VILLAS OF LAKEWOOD ESTATES OF TIMBER PINES, INC.

**Current Principal Place of Business:**

6872 TIMBER PINES BLVD  
SPRING HILL, FL 34606 US

**New Principal Place of Business:**

**Current Mailing Address:**

6872 TIMBER PINES BLVD  
SPRING HILL, FL 34606 US

**New Mailing Address:**

**FEI Number:** 59-3441277

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DROOGER, FRANKIE  
6872 TIMBER PINES BLVD  
SPRING HILL, FL 34606 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:** PD  
**Name:** EVEY, JAMES  
**Address:** 7438 BRIDGEWATER LANE  
**City-St-Zip:** SPRING HILL, FL 34606 US

**Title:** VD  
**Name:** WASHINGTON, MARLENE  
**Address:** 7422 BRIDGEWATER LANE  
**City-St-Zip:** SPRING HILL, FL 34606 US

**Title:** STD  
**Name:** JANSON, PATRICIA  
**Address:** 7478 BRIDGEWATER LANE  
**City-St-Zip:** SPRING HILL, FL 34606 US

I hereby 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 all other like empowered.

**SIGNATURE:** PATRICIA JANSON

STD

03/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date