

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 27, 2008 8:00 am**  
**Secretary of State**

03-27-2008 90051 001 \*\*\*840.00

**DOCUMENT # N97000003987**



1. Entity Name  
**LAKEWOOD RANCH TOWN CENTER OWNERS  
ASSOCIATION, INC.**

Principal Place of Business  
**8175 LAKEWOOD RANCH BLVD  
BRADENTON, FL 34202**

Mailing Address  
**8175 LAKEWOOD RANCH BLVD  
BRADENTON, FL 34202**

**66005094**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03112008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**65-0812806**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**AMODIO, JERREE  
8175 LAKEWOOD RANCH BLVD  
BRADENTON, FL 34202**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete  
NAME SWART, JOHN  
STREET ADDRESS 14400 COVENANT WAY  
CITY-ST-ZIP BRADENTON, FL 34202

TITLE V ☐ Delete  
NAME MARTIN, TIM  
STREET ADDRESS 14400 COVENANT WAY  
CITY-ST-ZIP BRADENTON, FL 34202

TITLE DVST ☐ Delete  
NAME AMODIO, JERREE  
STREET ADDRESS 14400 COVENANT WAY  
CITY-ST-ZIP BRADENTON, FL 34202

TITLE DV ☐ Delete  
NAME WEBER, BOB  
STREET ADDRESS 14400 COVENANT WAY  
CITY-ST-ZIP BRADENTON, FL 34202

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition  
NAME KENNELLY, BRIAN  
STREET ADDRESS 14400 COVENANT WAY  
CITY-ST-ZIP LAKEWOOD RANCH, FL 34202

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT WEBER  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/08  
Date

941-755-6574  
Daytime Phone #