2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N97000006498

FILED Jun 05, 2012 Secretary of State

Entity Name: LAKEWOOD AT THE LAKES AT THREE OAKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O ALLIANT PROPERTY MANAGEMENT, LLC

6719 WINKLER ROAD, SUITE 200

FT MYERS, FL 33919

Current Mailing Address:

New Mailing Address:

FT MYERS, FL 33967

C/O ALLIANT PROPERTY MANAGEMENT, LLC

6719 WINKLER ROAD, SUITE 200

FT MYERS, FL 33919

9160 PITTSBURGH BOULEVARD

New Principal Place of Business:

9160 PITTSBURGH BOULEVARD

FT MYERS, FL 33967

FEI Number: 59-3513402 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ALLIANT PROPERTY MANAGEMENT, LLC PARAGON FINANCIALS SERVICES, INC 8270 COLLEGE PARKWAY

6719 WINKLER RD STE 200 SUITE 104

FT MYERS, FL 33919 US FORT MYERS, FL 33919 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: DEBBIE CONRAD 06/05/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

MOUNTS, BOB Name:

17511 STEPPING STONE DR. Address: City-St-Zip: FORT MYERS, FL 33967

Title:

Name: ALLOWAY, WES

Address: 17521 STEPPING STONE DR. City-St-Zip: FORT MYERS, FL 33967

Title: TD

REDAVID, LYNN Name:

Address: 9031 PITTSBURGH BLVD. City-St-Zip: FORT MYERS, FL 33967

Title: SD

Name: ALLOWAY, WES

17521 STEPPING STONE DR. Address: City-St-Zip: FT. MYERS, FL 33967

ROSEN, JAY Name:

9050 PITTSBURGH BLVD Address: FT. MYERS, FL 33967 City-St-Zip:

Title:

Title:

DUFF, JOHN Name:

Address: 17390 STEPPING STONE DR. FT. MYERS, FL 33967 City-St-Zip:

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.

VΡ SIGNATURE: WES ALLOWAY 06/05/2012