

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90244 005 ****61.25

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1. Entity Name

NON SHAREHOLDERS OWNERS ASSOCIATION OF LAKEWOOD VILLAGE, INCORPORATED



Principal Place of Business

**LOT #258
1455 90TH AVE
VERO BEACH FL 32966**

Mailing Address

**LOT #258
1455 90TH AVE
VERO BEACH FL 32966**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0794937**

Applied For

Not Applicable

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

**SCHLOW, MARTHA MAE C
LOT #258
1455 90TH AVE
VERO BEACH FL 32966**

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

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PD	SCHERRER, RON W	1455 90TH AVE #A42 VERO BEACH FL 32966				
	VPD	ASSBLIN, KAREN	1455 90TH AVE #148 VERO BEACH FL 32966		AL BONTI	1455 90TH AVE #286	VERO BEACH, FL 32966
	SD	CASTELLANO, CARMELA	1455 90TH AVENUE, #180 VERO BEACH FL 32966				
	TD	SCHERRER, LINDA	1455 90TH AVE #A42 VERO BEACH FL 32966				
	D	BONTI, AL	1455 90TH AVE #286 VERO BEACH FL 32966				
	D	LISTON, NANCY	1455 90TH AVE #A6 VERO BEACH FL 32966				

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **RONALD W SCHERRER** 1-11-03 772-794-9860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR