

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706025

Entity Name: LAKEWOOD COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**128 LAKE OTIS RD.
WINTER HAVEN, FL 33884**Current Mailing Address:**PO BOX 2941
WINTER HAVEN, FL 33883 US**FEI Number:** 59-2336744**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BENNETT, JAMES CARLIN
128 LAKE OTIS ROAD
WINTER HAVEN, FL 33884 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:** JAMES CARLIN BENNETT

03/06/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	BENNETT, CARLIN
Address	128 LAKE OTIS ROAD
City-State-Zip:	WINTER HAVEN FL 33884

Title	VP
Name	OBER, CRAIG
Address	140 LAKE MARIAM RD.
City-State-Zip:	WINTER HAVEN FL 33884

Title	DIRECTOR
Name	HOVERKAMP, JACKIE
Address	117 LAKE OTIS ROAD
City-State-Zip:	WINTER HAVEN FL 33884

Title	CORRESPONDING SECRETARY
Name	NEIDRINGHAUS, LAURA
Address	140 LAKE OTIS ROAD
City-State-Zip:	WINTER HAVEN FL 33884

Title	TD
Name	NEIDRINGHAUS, LAURA
Address	140 LAKE OTIS RD.
City-State-Zip:	WINTER HAVEN FL 33884

Title	DIRECTOR
Name	VARNER, PHILLIP
Address	116 LAKE MARIAM ROAD
City-State-Zip:	WINTER HAVEN FL 33884

Title	DIRECTOR
Name	SENEY, MIKE
Address	240 LAKE LINK ROAD
City-State-Zip:	WINTER HAVEN FL 33884

Title	DIRECTOR
Name	EKAITIS, HARRY
Address	120 LAKE MARIAM ROAD
City-State-Zip:	WINTER HAVEN FL 33884

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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: LAURA NEIDRINGHAUS**TREASURER**

03/06/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BENNETT, KENNETH
Address	248 LAKE LINK ROAD
City-State-Zip:	WINTER HAVEN FL 33884