

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007790

Entity Name: LAKEWOOD RANCH COMMUNITY ACTIVITIES, INC.**Current Principal Place of Business:**6310 LAKEWOOD RANCH BLVD
LAKEWOOD RANCH, FL 34202**Current Mailing Address:**6310 LAKEWOOD RANCH BLVD
LAKEWOOD RANCH, FL 34202**FEI Number:** 65-1060278**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BASILONE, LORI
6310 LAKEWOOD RANCH BLVD
LAKEWOOD RANCH, FL 34202 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title TREASURER, DIRECTOR
Name SHARAK, THERESA
Address 6310 LAKEWOOD RANCH BLVD
City-State-Zip: LAKEWOOD RANCH FL 34202

Title DIRECTOR
Name PHILLIPS, MARIBETH
Address 6310 LAKEWOOD RANCH BLVD
City-State-Zip: LAKEWOOD RANCH FL 34202

Title PRESIDENT, DIRECTOR
Name SHEA, FRANK
Address 6310 LAKEWOOD RANCH BLVD
City-State-Zip: LAKEWOOD RANCH FL 34202

Title DIRECTOR
Name SABATO, ANITA
Address 6310 LAKEWOOD RANCH BLVD
City-State-Zip: LAKEWOOD RANCH FL 34202

Title DIRECTOR
Name GOWGIEL, MARIE
Address 6310 LAKEWOOD RANCH BLVD
City-State-Zip: LAKEWOOD RANCH FL 34202

Title SECRETARY, DIRECTOR
Name PELOQUIN, STEPHEN
Address 6310 LAKEWOOD RANCH BLVD
City-State-Zip: LAKEWOOD RANCH FL 34202

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: THERESA C SHARAK**DIRECTOR, TREASURER 01/15/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date