

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009501

Entity Name: THE PARK AT LAKEWOOD COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
FT MYERS, FL 33916**Current Mailing Address:**C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
FT MYERS, FL 33916 US**FEI Number:** 57-1143697**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KELLOGG, CODY
C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
FT MYERS, FL 33916 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:** CODY KELLOGG

05/09/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name RAMOS, BERNICE
Address C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

Title VP
Name MATUSZEK, SUE
Address C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

Title MEMBER AT LARGE
Name HAUPTMAN, DONNA
Address C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

Title TREASURER
Name SATTERSTEN, SUE
Address C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

Title PRESIDENT
Name VANSCHUYVER, LISA
Address C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

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: VANSCHUYVER , LISA

PRESIDENT

05/09/2022

Electronic Signature of Signing Officer/Director Detail

Date