### **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N39557

Entity Name: LAWNWOOD PLACE HOMEOWNERS ASSOCIATION, INC.

FILED Feb 27, 2020 Secretary of State 8429453113CC

# **Current Principal Place of Business:**

676 NE LITTLE KAYAK PT PORT ST LUCIE. FL 34983

## **Current Mailing Address:**

P.O. BOX 306

FORT PIERCE. FL 34954 US

FEI Number: 65-0680310 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

CORNETT, JANE L 759 SW FEDERAL HIGHWAY SUITE 213 STUART, FL 34994 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: JANE CORNETT 02/27/2020

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title DIRECTOR

Name NEIDHARDT, ROBERT Name SAVAGE, EUGENE

Address P.O. BOX 306 Address P.O. BOX 306

City-State-Zip: FORT PIERCE FL 34954 City-State-Zip: FORT PIERCE FL 34954

Title VP, TREASURER, DIRECTOR Title SECRETARY, DIRECTOR

Name SNYDER, BRYAN Name SHIVERS, SYLVIA

Address PO BOX 306 Address P.O. BOX 306

City-State-Zip: FORT PIECE FL 34954 City-State-Zip: FORT PIERCE FL 34954

Title DIRECTOR

Name LOWRY, DEBRA

Address P.O. BOX 306

City-State-Zip: FORT PIERCE FL 34954

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: BRYAN SNYDER TREASURER

Electronic Signature of Signing Officer/Director Detail

02/27/2020

Date