

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005751

Entity Name: LAKEWOOD AT MEADOW WOODS CONDOMINIUM
ASSOCIATION, INC.**FILED**
Mar 15, 2025
Secretary of State
6266278302CC**Current Principal Place of Business:**% NAB COMMUNITY MANAGEMENT, LLC
13814 TIMBERBROOK DR #104
ORLANDO, FL 32824**Current Mailing Address:**% NAB COMMUNITY MANAGEMENT, LLC
P.O. BOX 770446
ORLANDO,, FL 32877 US**FEI Number: 59-3203573****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NAB COMMUNITY MANAGEMENT, LLC
13814 TIMBERBROOK DR
#104
ORLANDO, FL 32824 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: NEIL BAILEY****03/15/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title VP
Name BATCHELOR, ROBERT
Address 13814 TIMBERBROOK DR
#104
City-State-Zip: ORLANDO FL 32824Title PRESIDENT
Name CANDIDA, MERCADO
Address 13814 TIMBERBROOK DR
#104
City-State-Zip: ORLANDO FL 32824Title DIRECTOR
Name SHEILDS, LEONARD
Address 13814 TIMBERBROOK DR
#104
City-State-Zip: ORLANDO FL 32824Title SECRETARY
Name RUIZ, ADALBERTO
Address 13814 TIMBERBROOK DR
104
City-State-Zip: ORLANDO FL 32824Title T
Name SCHAUER, KEVIN W
Address 13814 TIMBERBROOK DR
104
City-State-Zip: ORLANDO FL 32824

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: KEVIN SCHAUER**TREASURER****03/15/2025**

Electronic Signature of Signing Officer/Director Detail

Date