

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 706286

Entity Name: LAKE MAITLAND TERRACE APARTMENTS, INC.

FILED
Mar 07, 2023
Secretary of State
4649248409CC

Current Principal Place of Business:

1140 S ORLANDO AVE.
ASSOCIATION OFFICE
MAITLAND, FL 32751

Current Mailing Address:

1140 S ORLANDO AVE.
ASSOCIATION OFFICE
MAITLAND, FL 32751 US

FEI Number: 59-1311770

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LARSEN SLATEN, PLLC
5323 MILLENIA LAKES BLVD.
SUITE 300
ORLANDO, FL 32839 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: THOMAS R. SLATEN, JR., ESQ.

03/07/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name JOHNSON, KRISTEN
Address 1140 S ORLANDO AVE.
ASSOCIATION OFFICE
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name BRIGGS, JEFFREY
Address 1140 S ORLANDO AVE.
ASSOCIATION OFFICE
City-State-Zip: MAITLAND FL 32751

Title VP
Name MUSCATO, LINDSAY
Address 1140 S ORLANDO AVE.
ASSOCIATION OFFICE
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name SMITH, GRACIA
Address 1140 S ORLANDO AVE.
ASSOCIATION OFFICE
City-State-Zip: MAITLAND FL 32751

Title SECRETARY
Name ANDERSON, JENNIFER
Address 1140 S ORLANDO AVE.
ASSOCIATION OFFICE
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name PARKINS, WAYNE
Address 1140 S ORLANDO AVE.
ASSOCIATION OFFICE
City-State-Zip: MAITLAND FL 32751

Title TREASURER
Name GRAMMER, ROBERT
Address 1140 S ORLANDO AVE.
ASSOCIATION OFFICE
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name CALDWELL, BARBARA
Address 1140 S ORLANDO AVE.
ASSOCIATION OFFICE OFFICE
City-State-Zip: MAITLAND FL 32751

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: RANGEL RODRIGUEZ

MG

03/07/2023

Electronic Signature of Signing Officer/Director Detail

Date