

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 720896

Entity Name: LAFAYETTE OAKS HOMES ASSOCIATION, INC.

Current Principal Place of Business:

5306 TOURAIN DRIVE
TALLAHASSEE, FL 32308

Current Mailing Address:

POST OFFICE BOX 13483
TALLAHASSEE, FL 32317 US

FEI Number: 23-7119200

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSIER AND COMPANY
1882 CAPITAL CIRCLE NE
SUITE 203
TALLAHASSEE, FL 32308 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: SHANNON ROSIER

07/20/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SD
Name RODE, SARA
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317

Title PRESIDENT
Name LONG, RICHARD
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317

Title TREASURER
Name NORDIN, RALPH
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR
Name HAYES, ROB
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317

Title MANAGER
Name ROSIER AND COMPANY
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317

Title VP
Name CAPARELLO, JASON
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR
Name THOMPSON, ROBIN
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR
Name CARTER, WILLIAM GREGORY
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317

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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: RICHARD C. LONG

PRESIDENT

07/20/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MULLINAX, ROBERT
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR
Name UNDERHILL, BRIAN
Address POST OFFICE BOX 13483
City-State-Zip: TALLAHASSEE FL 32317