

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 723059

**FILED**  
**Apr 10, 2018**  
**Secretary of State**  
**CC3137091483**

**Entity Name:** LAKELAND LETTER CARRIERS ASSOCIAION, INC.

**Current Principal Place of Business:**

2434 GOLFVIEW ST.  
LAKELAND, FL 33801

**Current Mailing Address:**

PO BOX 3343  
LAKELAND, FL 33802 US

**FEI Number: 59-1727916**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MITCHELL, JOHN W  
1440 7TH STREET SOUTHEAST  
WINTER HAVEN, FL 33880 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:** JOHN W MITCHELL

04/10/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name BARBARA, MEURER  
Address 1711 STAUNTON AVE  
City-State-Zip: LAKELAND FL 33803

Title ST  
Name GREALISH, JOHN V  
Address 6838 N SOCRUM LOOP ROAD  
City-State-Zip: LAKELAND FL 33809

Title PRESIDENT  
Name MITCHELL, JOHN  
Address 1440 7TH STREET SE  
City-State-Zip: WINTER HAVEN FL 33880

Title EXECUTIVE V.P.  
Name RIVERA, CARLOS  
Address 1941 ALTAVISTA  
City-State-Zip: LAKELAND FL 33810

Title VP  
Name BREAULT, JOSHUA  
Address 627 HOUSTON ST.  
City-State-Zip: LAKELAND FL 33813

Title TRUSTEE  
Name LOGUE, STACEY  
Address 2646 RALPH RD.  
City-State-Zip: LAKELAND FL 33801

Title TRUSTEE  
Name ROKOSZ, WILLIAM  
Address 17698 ACACIA DR.  
City-State-Zip: N. FT. MYERS FL 33917

*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:** JOHN W MITCHELL

**PRESIDENT**

04/10/2018

Electronic Signature of Signing Officer/Director Detail

Date