

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724367

Entity Name: LAGOON VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

5440 FIRST COAST HWY
AMELIA ISLAND, FL 32034

Current Mailing Address:

C/O AMELIA ISLAND MANAGEMENT
5440 FIRST COAST HWY.
AMELIA ISLAND, FL 32034 US

FEI Number: 59-1567340

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MUIR, ROBERT CIII
5440 FIRST COAST HWY
AMELIA ISLAND, FL 32034 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name STEARNS, COLE
Address C/O AMELIA ISLAND MANAGEMENT
5440 FIRST COAST HWY.
City-State-Zip: AMELIA ISLAND FL 32034

Title SECRETARY, TREASURER
Name EWING, KATHERINE
Address C/O AMELIA ISLAND MANAGEMENT
5440 FIRST COAST HWY.
City-State-Zip: AMELIA ISLAND FL 32034

Title DIRECTOR
Name JUERGENSMEYER, JULIAN
Address C/O AMELIA ISLAND MANAGEMENT
5440 FIRST COAST HWY
City-State-Zip: AMELIA ISLAND FL 32034

Title VP.
Name HALL, DENNIS A
Address 5440 FIRST COAST HWY
City-State-Zip: AMELIA ISLAND FL 32034

Title D
Name SMYTHE, NANCY
Address C/O AMELIA ISLAND MANAGEMENT
5440 FIRST COAST HWY.
City-State-Zip: AMELIA ISLAND FL 32034

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: COLE STEARNS

PRESIDENT

03/26/2014

Electronic Signature of Signing Officer/Director Detail

Date