

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739006

Entity Name: SOUTHWIND LAKES HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**C/O CREST MANAGEMENT GROUP
6413 CONGRESS AVE SUITE 100.
BOCA RATON, FL 33487**Current Mailing Address:**C/O CREST MANAGEMENT GROUP
6413 CONGRESS AVE SUITE 100.
BOCA RATON, FL 33487 US**FEI Number:** 59-2349710**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CREST MANAGEMENT GROUP
6413 CONGRESS AVE
STE 100
BOCA RATON, FL 33487 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:** GARY BUDD

03/15/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name ROBERTS, PATRICIA
Address 6413 CONGRESS AVENUE
 SUITE 100
City-State-Zip: BOCA RATON FL 33487

Title VP
Name LOCANDRO, ANITA
Address 6413 CONGRESS AVENUE
 SUITE 100
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name PIEKOS, ERIC
Address 6413 CONGRESS AVE
 SUITE 100
City-State-Zip: BOCA RATON FL 33487

Title P
Name PERKINS, MICHAEL
Address 6413 CONGRESS AVENUE
 SUITE 100
City-State-Zip: BOCA RATON FL 33487

Title SECRETARY
Name HOLCOMBE, JOHN
Address C/O CREST MANAGEMENT GROUP
 6413 CONGRESS AVE SUITE 100
City-State-Zip: BOCA RATON FL 33487

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: PERKINS , MICHAEL

PRESIDENT

03/15/2018

Electronic Signature of Signing Officer/Director Detail

Date