

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739132

Entity Name: LAKE MANDARIN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

15 SIMMONS RD
ATLANTIC BEACH , FL 32233

Current Mailing Address:

1015 ATLANTIC BLVD
274
ATLANTIC BEACH, FL 32233 US

FEI Number: 59-1911806

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELIM SERVICES
15 SIMMONS RD
ATLANTIC BEACH , FL 32233 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: RHONDA HUTTO

02/17/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name WARREN, CHRISTINA
Address 1015 ATLANTIC BLVD
274
City-State-Zip: ATLANTIC BEACH FL 32233

Title VPD
Name DEE, DAVID
Address 1015 ATLANTIC BLVD
274
City-State-Zip: ATLANTIC BEACH FL 32233

Title STD
Name HOLDREN, SANDRA
Address 1015 ATLANTIC BLVD
274
City-State-Zip: ATLANTIC BEACH FL 32233

Title D
Name AHERRON, BARBARA
Address 1015 ATLANTIC BLVD
274
City-State-Zip: ATLANTIC BEACH FL 32233

Title D
Name MURPHY, KEITH
Address 1015 ATLANTIC BLVD
274
City-State-Zip: ATLANTIC BEACH FL 32233

Title D
Name STANTON, KIMBERLY
Address 1015 ATLANTIC BLVD
274
City-State-Zip: ATLANTIC BEACH FL 32233

Title D
Name WILLIAMS, JIMMY
Address 1015 ATLANTIC BLVD
274
City-State-Zip: ATLANTIC BEACH FL 32233

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: CHRISTINA WARREN

PRESIDENT

02/17/2014

Electronic Signature of Signing Officer/Director Detail

Date