I hereby certify that the information indicated on this report or supplemental report is true and acc oath; that I am an officer or director of the corporation or the receiver or trustee empowered to ex above, or on an attachment with all other like empowered.		
SIGNATURE: HELEN DICKS	PRES	04/04/2019

#### DOCUMENT# 740459

#### Entity Name: THE LAKES VILLAS CONDOMINIUM II ASSOCIATION, INC

#### **Current Principal Place of Business:**

970 LAKE CARILLON DR SUITE 102 SAINT PETERSBURG, FL 33716

# **Current Mailing Address:**

970 LAKE CARILLON DR SUITE 102 SAINT PETERSBURG, FL 33716 US

# FEI Number: 59-1774574

# Name and Address of Current Registered Agent:

PROFESSIONAL BAYWAY MANAGEMENT INC 970 LAKE CARILLON DR SUITE 102 SAINT PETERSBURG, FL 33716 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	BLAIR NEWTON			04/04/2019	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	PRESIDENT	Title	VP		
Name	DICKS, HELEN	Name	LESSAC, RICHARD		
Address	970 LAKE CARILLON DR SUITE 102	Address	970 LAKE CARILLON DR SUITE 102		
City-State-Zip:	SAINT PETERSBURG FL 33716	City-State-Zip:	SAINT PETERSBURG FL 33710	6	
Title	SECRETARY	Title	DIRECTOR		
Name	MARANO, THERESA	Name	HARANGI, ENIKO ANN		
Address	970 LAKE CARILLON DR SUITE 102	Address	970 LAKE CARILLON DR SUITE 102		
City-State-Zip:	SAINT PETERSBURG FL 33716	City-State-Zip:	SAINT PETERSBURG FL 33710	6	
Title	TREASURER				
Name	LAWRENCE , DAVID				
Address	970 LAKE CARILLON DR SUITE 102				
City-State-Zip:	SAINT PETERSBURG FL 33716				

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 04, 2019 Secretary of State 8100179606CC

Certificate of Status Desired: No

Date