

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 743826

**Entity Name:** MANGO LANE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 03, 2020**  
**Secretary of State**  
**5039285184CC**

**Current Principal Place of Business:**

MANGO LANE HOMEOWNERS ASSOC.  
10464 S.W. 129TH TERRACE  
MIAMI, FL 33176

**Current Mailing Address:**

MANGO LANE HOMEOWNERS ASSOC.  
10464 S.W. 129TH TERRACE  
MIAMI, FL 33176 US

**FEI Number: 59-2159403**

**Certificate of Status Desired: No**

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

PAIGE, ROBERT E  
9500 S DADELAND BLVD #550  
MIAMI, FL 33156 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	S	Title	T
Name	SEVCIK, FRAN	Name	WOLF, CHERYL
Address	10324 SW 129 TERR	Address	10464 SW 129 TERRACE
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33176
Title	D	Title	PRESIDENT
Name	WOLF, ANDREW	Name	KATZ, RON
Address	10464 SW 129 TERRACE	Address	12927 SW 103 PLACE
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33176
Title	VP		
Name	PANAGAKOS, MARIA		
Address	10425 SW 129 TERR		
City-State-Zip:	MIAMI FL 33176		

*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: CHERYL WOLF**

**TREASURER**

**02/03/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date