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: JAMES FARMER

Electronic Signature of Signing Officer/Director Detail

### Name and Address of Current Registered Agent:

EDWARD F. HOLODAK, P.A. 7951 SW 6TH STREET SUITE 210 PLANTATION, FL 33324 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

## **Officer/Director Detail :**

Title	Ρ	Title	VP
Name	FARMER, JAMES	Name	ALBERT, GERARD
Address	1520 NW 96TH AVE.	Address	9690 NW 16TH CT
City-State-Zip:	PEMBROKE PINES FL 33024	City-State-Zip:	PEMBROKE PINES FL 33024
Title	ST		
Name	REEVES, JANET		
Address	9637 NW 16 ST.		
City-State-Zip:	PEMBROKE PINES FL 33024		

**DOCUMENT# 748854** Entity Name: EAST LAKES IN PEMBROKE PINES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:** 

9732 N.W. 16TH COURT PEMBROKE PINES, FL 33024

## **Current Mailing Address:**

9732 N.W. 16TH COURT PEMBROKE PINES, FL 33024

# FEI Number: 59-1937067

## FILED Apr 28, 2016 Secretary of State CC1710030734

Certificate of Status Desired: No

Date

04/28/2016 Date

PRESIDENT