

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750032

**Entity Name:** LAKEBRIDGE PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

516 LAKEVIEW ROAD  
VILLA 8  
CLEARWATER, FL 33756

**Current Mailing Address:**

516 LAKEVIEW ROAD  
VILLA 8  
CLEARWATER, FL 33756 US

**FEI Number:** 59-2777037

**Certificate of Status Desired:** Yes

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

KRAMER, ROBERT EESQ  
555 W GRANADA BLVD STE A9  
ORMOND BEACH, FL 32174 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 PD  
Name FLYNN, THOMAS F  
Address 516 LAKEVIEW ROAD #8  
City-State-Zip: CLEARWATER FL 33756

Title VPD  
Name FLYNN, KEVIN T  
Address 516 LAKEVIEW RD #8  
City-State-Zip: CLEARWATER FL 33756

Title D  
Name KYSKA, ROBERT  
Address 875 WILMETTE AVENUE  
City-State-Zip: ORMOND BEACH FL 32174

Title S, T  
Name HAZARD, TREE  
Address 876 QUAIL RUN  
City-State-Zip: ORMOND BEACH FL 32174

Title D  
Name MINNICKS, JERRY  
Address 875 WILMETTE AVENUE  
City-State-Zip: ORMOND BEACH FL 32174

*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:** KEVIN FLYNN

**AGENT**

**03/26/2018**

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date