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: SAM BAILEY

PRESIDENT

04/04/2014 Date

Date

Electronic Signature of Signing Officer/Director Detail

C/O WISE PROPERTY MANAGEMENT, INC. 17824 N. US HIGHWAY 41 LUTZ, FL 33549 US

Entity Name: LAKE ELLEN VILLAS, INC.

Current Principal Place of Business:

FEI Number: 59-3095876

Current Mailing Address:

DOCUMENT# 752606

17824 N. US HWY 41 LUTZ. FL 33549

Name and Address of Current Registered Agent:

BAILEY, SAM 3405 ELLENWOOD LANE TAMPA, FL 33618 US

FILED Apr 04, 2014 Secretary of State CC8401795245

Certificate of Status Desired: No

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

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Officer/Director Detail :

Title	PD	Title	VPD
Name	BAILEY, SAM	Name	COCCIA, JAMES
Address	3405 ELLENWOOD LANE	Address	3411 ELLENWOOD LANE
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618
Title	SECRETARY/ TREASURER	Title	DIRECTOR
	SEGNETANT/ TREASUREN	1140	2.1.20.01.
Name	STEWART, CARL	Name	RYAN, STEVE
Name	STEWART, CARL	Name	RYAN, STEVE