

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752606

Entity Name: LAKE ELLEN VILLAS, INC.

Current Principal Place of Business:

18550 NORTH DALE MABRY HIGHWAY
LUTZ, FL 33548

Current Mailing Address:

C/O WISE PROPERTY MANAGEMENT, INC.
18550 NORTH DALE MABRY HIGHWAY
LUTZ, FL 33548 US

FEI Number: 59-3095876

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GLAUSIER, CHARLES E
400 N. ASHLEY DRIVE
SUITE 2020
TAMPA, FL 33602 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 PRESIDENT
Name BAILEY, SAM
Address 18550 NORTH DALE MABRY
 HIGHWAY
City-State-Zip: LUTZ FL 33548

Title VP
Name COCCIA, JAMES P.
Address 18550 NORTH DALE MABRY
 HIGHWAY
City-State-Zip: LUTZ FL 33548

Title TREASURER
Name MARTINEZ, NANCY
Address 18550 NORTH DALE MABRY
 HIGHWAY
City-State-Zip: LUTZ FL 33548

Title DIRECTOR
Name PLATT, MARLENE
Address 18550 NORTH DALE MABRY
 HIGHWAY
City-State-Zip: LUTZ FL 33548

Title SECRETARY
Name HUNTER, KATHERINE
Address 18550 NORTH DALE MABRY
 HIGHWAY
City-State-Zip: LUTZ FL 33548

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: BAILEY , SAM

PRESIDENT

03/31/2020

Electronic Signature of Signing Officer/Director Detail

Date