

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754770

Entity Name: LOCHMOOR VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O JACKSON MANAGEMENT
PO BOX 151969
CAPE CORAL, FL 33915

Current Mailing Address:

C/O JACKSON MANAGEMENT
PO BOX 151969
CAPE CORAL, FL 33915 US

FEI Number: 59-2212017

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACKSON MANAGEMENT
C/O JACKSON MANAGEMENT
PO BOX 151969
CAPE CORAL, FL 33915 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: AMANDA JACKSON

03/27/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MOOMIJAN, WAYNE
Address C/O JACKSON MANAGEMENT
 PO BOX 151969
City-State-Zip: CAPE CORAL FL 33915

Title TREASURER
Name FONTZ, STEVE
Address C/O JACKSON MANAGEMENT
 PO BOX 151969
City-State-Zip: CAPE CORAL FL 33915

Title DIRECTOR
Name TOBECK, MICHAEL
Address C/O JACKSON MANAGEMENT
 PO BOX 151969
City-State-Zip: CAPE CORAL FL 33915

Title SECRETARY
Name MCINNIS, CANDICE
Address C/O JACKSON MANAGEMENT
 PO BOX 151969
City-State-Zip: CAPE CORAL FL 33915

Title VP
Name TOBECK, KEITH
Address C/O JACKSON MANAGEMENT
 PO BOX 151969
City-State-Zip: CAPE CORAL FL 33915

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: CANDICE MCINNIS

SECRETARY

03/27/2024

Electronic Signature of Signing Officer/Director Detail

Date