

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755414

Entity Name: EAST LAKE BUNGALOWS HOME OWNERS' ASSOCIATION, INC.**FILED**
Mar 04, 2016
Secretary of State
CC5855753379**Current Principal Place of Business:**FIRSTSERVICE RESIDENTIAL
12794 W. FOREST HILL BLVD SUITE31
WELLINGTON, FL 33414**Current Mailing Address:**FIRSTSERVICE RESIDENTIAL
12794 W. FOREST HILL BLVD SUITE31
WELLINGTON, FL 33414 US**FEI Number: 59-2073031****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ST.JOHN ROSSIN PODESTA & BURR, PLLC
CENTURION TOWER
1601 FORUM PLACE SUITE 700
WEST PALM BEACH, FL 33401 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: ST.JOHN ROSSIN PODESTA & BURR, PLLC****03/04/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRESIDENT
Name STECKER, PATSY
Address 2140 WIGHTMAN DRIVE
City-State-Zip: WELLINGTON FL 33414Title D
Name NEGRE, ADELINE
Address 2123 WIGHTMAN DRIVE
City-State-Zip: WELLINGTON FL 33414Title D
Name ABRAMS, JILL
Address 2059 WIGHTMAN DRIVE
City-State-Zip: WELLINGTON FL 33414Title DST
Name MILLER, WENDELL
Address 11683 WIMBLEDON CIRCLE
City-State-Zip: WELLINGTON FL 33414Title D
Name KROEGER, SUSAN
Address 2083 WIGHTMAN DRIVE
City-State-Zip: WELLINGTON FL 33414

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: PATSY STECKER**PRESIDENT****03/04/2016**

Electronic Signature of Signing Officer/Director Detail

Date