

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756845

Entity Name: LEE'S CROSSING HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5801 KIMBERTON WAY
LAKE WORTH, FL 33463**Current Mailing Address:**5801 KIMBERTON WAY
LAKE WORTH, FL 33463 US**FEI Number:** 59-2171079**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER, JOHN
3540 FOREST HILL BLVD
WEST PALM BEACH, FL 33454 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	DP
Name	BECKER, JOHN
Address	5801 KIMBERTON WAY
City-State-Zip:	LAKE WORTH FL 33463

Title	DST
Name	STANLEY, BRYAN
Address	5801 KIMBERTON WAY
City-State-Zip:	LAKE WORTH FL 33463

Title	VP
Name	WILLET, GLEN
Address	5801 KIMBERTON WAY
City-State-Zip:	LAKE WORTH FL 33463

Title	D
Name	LOZIER, FRANK
Address	5801 KIMBERTON WAY
City-State-Zip:	LAKE WORTH FL 33463

Title	D
Name	FRANTZ, DOUG
Address	5801 KIMBERTON WAY
City-State-Zip:	LAKE WORTH FL 33463

Title	D
Name	FRANTZ, CARRIDAD
Address	5801 KIMBERTON WAY
City-State-Zip:	LAKE WORTH FL 33463

Title	DIRECTOR
Name	STANLEY, PHYLLIS
Address	5801 KIMBERTON WAY
City-State-Zip:	LAKE WORTH FL 33463

Title	DIRECTOR
Name	MOSS, HOSEA
Address	5801 KIMBERTON WAY
City-State-Zip:	LAKE WORTH FL 33463

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: JOHN BECKER**PRESIDENT****02/24/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date