### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 760928** 

Entity Name: BAY LAKES AT GRANADA HOMEOWNERS' ASSOCIATION, INC

FILED
Jan 18, 2023
Secretary of State
0084241229CC

### **Current Principal Place of Business:**

C/O REALMANAGE 200 S ORANGE AVE SUITE 1475 ORLANDO, FL 32801

## **Current Mailing Address:**

C/O REALMANAGE P O BOX 803555 DALLAS, TX 75380 US

FEI Number: 59-2155255 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name ENGLAND, KARLEIGH Name FORBES, GILBERT

Address C/O REALMANAGE Address C/O REALMANAGE

C/O REALMANAGE Address C/O REALMANAGE
200 S ORANGE AVE SUITE 1475 200 S ORANGE AVE SUITE 1475

ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

TitleTREASURERTitleDIRECTORNameVANATTA, COLINNameCAMINAS, ANA

Address C/O REALMANAGE Address C/O REALMANAGE

200 S ORANGE AVE SUITE 1475 Address C/O REALMANAGE
200 S ORANGE AVE SUITE 1475

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title SECRETARY Title DIRECTOR

Name KAAK, ELLEN Name BURGOS, GISSELLE

Address C/O REALMANAGE Address C/O REALMANAGE

200 S ORANGE AVE SUITE 1475 200 S ORANGE AVE SUITE 1475

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title DIRECTOR Title DIRECTOR

Name HEAD, CHRISTINA Name FAZEKAS, JANICE

Address C/O REALMANAGE Address C/O REALMANAGE

200 S ORANGE AVE SUITE 1475 200 S ORANGE AVE SUITE 1475

City-State-Zip: ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

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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: KARLEIGH ENGLAND PRESIDENT 01/18/2023

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

DIRECTOR Title

HUNTER, HEATHER Name

Address

C/O REALMANAGE 200 S ORANGE AVE SUITE 1475

City-State-Zip: ORLANDO FL 32801