

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761119

Entity Name: DOS LAGOS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**

C/O GRS MANAGEMENT ASSOCIATES INC
3900 WOODLAKE BLVD SUITE 309
LAKE WORTH , FL 33463

Current Mailing Address:

C/O GRS MANAGEMENT ASSOCIATES INC
3900 WOODLAKE BLVD SUITE 309
LAKE WORTH , FL 33463 US

FEI Number: 59-2159401**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

KAYE BENDER REMBAUM, PL
1200 PARK CENTRAL BOULEVARD SOUTH
POMPAHO BEACH, FL 33064 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: MICHAEL S. BENDER

04/11/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ROSS, ABBY
Address C/O GRS MANAGEMENT ASSOCIATES
INC
3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title VP
Name SCHUCHMAN, CHARLES R.
Address C/O GRS MANAGEMENT ASSOCIATES
INC
3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title SECRETARY
Name ABELES, ALAN
Address C/O GRS MANAGEMENT ASSOCIATES
INC
3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title PRESIDENT
Name RICE, SUZANNE
Address C/O GRS MANAGEMENT ASSOCIATES
INC
3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title TREASURER
Name REED, DESIREE
Address C/O GRS MANAGEMENT ASSOCIATES
INC
3900 WOODLAKE BLVD SUITE 309
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: SUZANNE RICE

PRESIDENT

04/11/2022

Electronic Signature of Signing Officer/Director Detail

Date