

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766514

Entity Name: LAKE RIDGE VILLAGE CLUB ASSOCIATION, INC.**Current Principal Place of Business:**620 N WYMORE RD
SUITE 240
MAITLAND, FL 32751**Current Mailing Address:**620 N WYMORE RD
SUITE 240
MAITLAND, FL 32751 US**FEI Number:** 59-2494950**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARMSTRONG, JANICE C
620 N WYMORE RD
SUITE 240
MAITLAND, FL 32751 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:** JANICE C. ARMSTRONG

01/24/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name OTERO, MARIA
Address 620 N WYMORE RD
 SUITE 240
City-State-Zip: MAITLAND FL 32751

Title VP
Name MAJORANO, LORI
Address 620 N WYMORE RD
 SUITE 240
City-State-Zip: MAITLAND FL 32751

Title TR
Name SCARLETT, RON
Address 620 N WYMORE RD
 SUITE 240
City-State-Zip: MAITLAND FL 32751

Title SC
Name TRAVIS, DEBORAH
Address 620 N WYMORE RD
 SUITE 240
City-State-Zip: MAITLAND FL 32751

Title ALTERNATE
Name SMOKE, CAROL
Address 620 N WYMORE RD
 SUITE 240
City-State-Zip: MAITLAND FL 32751

Title ALTERNATE
Name MELVIN, ANGELA
Address 620 N WYMORE RD
 SUITE 240
City-State-Zip: MAITLAND FL 32751

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: MARIA OTERO

PRESIDENT

01/24/2017

Electronic Signature of Signing Officer/Director Detail

Date