

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768921

Entity Name: EMERALD LAKES TOWNHOMES HOMEOWNERS ASSOCIATION, INC.**FILED**
Apr 13, 2015
Secretary of State
CC3451430512**Current Principal Place of Business:**1111 SE FEDERAL HWY.
SUITE 100
STUART, FL 34994**Current Mailing Address:**1111 SE FEDERAL HWY.
SUITE 100
STUART, FL 34994 US**FEI Number: 59-2303888****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ROSS, DEBORAH ESQ.
789 SW FEDERAL HWY.
SUITE 101
STUART, FL 34994 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	D
Name	ROBINSON, KEVIN
Address	1111 SE FEDERAL HWY. SUITE 100
City-State-Zip:	STUART FL 34994

Title	TD
Name	ENGLE, CYNTHIA
Address	1111 SE FEDERAL HWY. SUITE 100
City-State-Zip:	STUART FL 34994

Title	PD
Name	BYRUM, ANN
Address	1111 SE FEDERAL HWY. SUITE 100
City-State-Zip:	STUART FL 34994

Title	D
Name	MCALLISTER, JANET
Address	1111 SE FEDERAL HWY. SUITE 100
City-State-Zip:	STUART FL 34994

Title	VPD
Name	SESTA, ANDREW
Address	1111 SE FEDERAL HWY. SUITE 100
City-State-Zip:	STUART FL 34994

Title	SD
Name	STABILE, ANN MARIE
Address	1111 SE FEDERAL HWY. SUITE 100
City-State-Zip:	STUART FL 34994

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: ANN BYRUM**PRESIDENT****04/13/2015**

Electronic Signature of Signing Officer/Director Detail

Date