

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770146

**Entity Name:** CANALAKE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Mar 11, 2014**  
**Secretary of State**  
**CC0833275824**

**Current Principal Place of Business:**

CANALAKE HOMEOWNER ASSOCIATION, INC.  
5350 10TH AVENUE NORTH, SUITE 2  
GREENACRES, FL 33463

**Current Mailing Address:**

CANALAKE HOMEOWNER ASSOCIATION, INC.  
5350 10TH AVENUE NORTH, SUITE 2  
GREENACRES, FL 33463 US

**FEI Number:** 59-2339803

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MILBERG KLEIN, P.L.  
5550 GLADES ROAD  
SUITE 500  
BOCA RATON, FL 33431 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:** DAVID Y. KLEIN, ESQ.

03/11/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, TREASURER  
Name MORRIS, PATRICK  
Address 3107 POOLSIDE DR.  
City-State-Zip: GREENACRES FL 33463

Title VP, SECRETARY  
Name PATUELLI, MARY  
Address 3107 POOLSIDE DRIVE  
City-State-Zip: GREENACRES FL 33463

Title ASST. SECRETARY  
Name DUNN, RICHARD  
Address 3107 POOLSIDE DRIVE  
City-State-Zip: GREENACRES FL 33463

Title DIRECTOR  
Name DONER, JEREMY  
Address 3107 POOLSIDE DRIVE  
City-State-Zip: GREENACRES 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:** PATRICK MORRIS

**PRESIDENT**

03/11/2014

Electronic Signature of Signing Officer/Director Detail

Date