DOCUMENT# N0000003100 Entity Name: TWIN LAKES AT CHRISTINA HOMEOWNER'S ASSOCIATION, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

6950 SHIMMERING DR. LAKELAND, FL 33813

Current Mailing Address:

P.O. BOX 5925 LAKELAND, FL 33807-5925 US

FEI Number: 59-3632807

Name and Address of Current Registered Agent:

AARON J. SILBERMAN, SILBERMAN LAW, P.A. 1105 W. SWANN AVENUE TAMPA, FL 33606 US FILED Apr 22, 2017 Secretary of State CC7654656181

Certificate of Status Desired: Yes

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

Officer/Director Detail :

	Title	DIRECTOR	Title	PRESIDENT
	Name	EDWARDS, ALICIA	Name	NORTHROP, MARIANNE
	Address	P.O. BOX 5925	Address	P.O. BOX 5925
	City-State-Zip:	LAKELAND FL 33807-5925	City-State-Zip:	LAKELAND FL 33807-5925
	Title	SECRETARY	Title	VP/TREASURER
	Title Name	SECRETARY REUTER, CHRISTINE	Title Name	VP/TREASURER SADLER, DAWN
	Name	REUTER, CHRISTINE	Name	SADLER, DAWN

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: MARIANNE NORTHROP

PRESIDENT

04/22/2017

Date

Electronic Signature of Signing Officer/Director Detail

Date