

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000003342

**Entity Name:** LAKE VICTORIA HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

650 VICTORIA SQUARE LANE  
LAKELAND, FL 33813

**Current Mailing Address:**

650 VICTORIA SQUARE LANE  
LAKELAND, FL 33813 US

**FEI Number:** 65-0739367

**Certificate of Status Desired:** No

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

SANOBA, GREGORY AESQ.  
422 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33801 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            PRESIDENT  
Name            ROBERTS, WILLIAM S. DR.  
Address        5789 LAKE VICTORIA DRIVE  
City-State-Zip: LAKELAND FL 33813

Title            TREASURER  
Name            BUTTERFIELD, STACY  
Address        615 VICTORIA SQUARE LANE  
City-State-Zip: LAKELAND FL 33813

Title            SECRETARY  
Name            RAY-OVERSTREET, ALICE  
Address        5759 LAKE VICTORIA DRIVE  
City-State-Zip: LAKELAND FL 33813

Title            VP  
Name            LITHGOW, TRUDI  
Address        633 VICTORIA SQUARE LANE  
City-State-Zip: LAKELAND FL 33813

Title            DIRECTOR  
Name            HOYLE, NIKI  
Address        5675 LAKE VICTORIA DRIVE  
City-State-Zip: LAKELAND FL 33813

Title            DIRECTOR  
Name            CHAPMAN, REGGIE  
Address        5846 LAKE VICTORIA COVE  
City-State-Zip: LAKELAND FL 33813

*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:** ALICE RAY-OVERSTREET

**SECRETARY**

**02/13/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date