

2015 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 DIRECTOR
Name HOLTER, ERIC MR
Address 5747 LAKE VICTORIA DRIVE
City-State-Zip: LAKELAND FL 33813

Title DIRECTOR
Name MCCABE, AMANDA MS
Address 645 VICTORIA SQUARE LANE
City-State-Zip: LAKELAND FL 33813

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

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

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

Title VP
Name TURNER, LYNNE MS
Address 5924 LAKE VICTORIA DRIVE
City-State-Zip: LAKELAND FL 33813

Title PRESIDENT
Name TURPIN, AMY MS
Address 5765 LAKE VICTORIA DRIVE
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

02/15/2015

Electronic Signature of Signing Officer/Director Detail

Date