

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

DOCUMENT# N00000007624

**Entity Name:** LAKE CAMILLE CONDOMINIUM HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 10, 2014**  
**Secretary of State**  
**CC7134258650**

**Current Principal Place of Business:**

2211 EAST 5TH STREET  
UNIT #24  
LEHIGH ACRES, FL 33936

**Current Mailing Address:**

3308 35TH STREET S W  
LEHIGH ACRES, FL 33976 04

**FEI Number: 16-1666674**

**Certificate of Status Desired: Yes**

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

HOPKINS, TERESA  
2211 EAST 5TH STREET  
UNIT #24  
LEHIGH ACRES, FL 33936 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            P/S  
Name            HOPKINS, TERESA  
Address        2211 EAST 5TH STREET #24  
City-State-Zip: LEHIGH ACRES FL 33936

Title            VP  
Name            RITCHEY, BETTY  
Address        2221 EAST 5TH STREET  
                  UNIT # 24  
City-State-Zip: LEHIGH ACRES FL 33936

*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: TERESA HOPKINS**

**PRESIDENT**

**02/10/2014**

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

\_\_\_\_\_  
Date