

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

DOCUMENT# N01000000139

**Entity Name:** COBBLESTONE OF MARION COUNTY HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Mar 28, 2014**  
**Secretary of State**  
**CC0896099878**

**Current Principal Place of Business:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809

**Current Mailing Address:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809

**FEI Number: 59-3740796**

**Certificate of Status Desired: No**

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

LELAND MANAGEMENT, INC.  
6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 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 SECRETARY, TREASURER  
Name BYRD, CHARLES E  
Address 6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title PRESIDENT  
Name CURTIN, GEORGE F  
Address 6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title VP  
Name LOMAX, GLENDELL  
Address 6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

*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: CURTIN GEORGE

PRESIDENT

03/28/2014

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

\_\_\_\_\_ Date