ntity Name: SPRING LAKE POINTE COMMUNITY ASSOCIATION, INC.	

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

620 N WYMORE ROAD SUITE 240 MAITLAND, FL 32751

Current Mailing Address:

DOCUMENT# N0100003878

620 N WYMORE ROAD SUITE 240 MAITLAND, FL 32751 US

FEI Number: 59-3758773

Name and Address of Current Registered Agent:

MAHNKE, ALICE F 620 N WYMORE ROAD SUITE 240 MAITLAND, FL 32751 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	ALICE F MAHNKE			02/20/2021	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	DIRECTOR	Title	VP/SEC/TREASURER		
Name	LIGHTNER, TIM	Name	HILAL, RAOUF		
Address	620 N WYMORE ROAD SUITE 240	Address	620 N WYMORE ROAD SUITE 240		
City-State-Zip:	MAITLAND FL 32751	City-State-Zip:	MAITLAND FL 32751		
Title	PRESIDENT	Title	DIRECTORY		
Name	KHUDA, KHALED	Name	PEREZ, MANNY		
Address	620 N WYMORE ROAD SUITE 240	Address	620 N WYMORE ROAD SUITE 240		
City-State-Zip:	MAITLAND FL 32751	City-State-Zip:	MAITLAND FL 32751		
Title	DIRECTOR				
Name	JACKSON, BOB				
Address	620 N WYMORE ROAD SUITE 240				
City-State-Zip:	MAITLAND FL 32751				

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.

PRESIDENT

SIGNATURE: KHUDA, KHALED

Electronic Signature of Signing Officer/Director Detail

FILED Feb 20, 2021 Secretary of State 1497099192CC

Certificate of Status Desired: No

02/20/2021 Date