## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100005868

Entity Name: LONG LAKE RANCHES HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 21, 2013
Secretary of State
CC1636621463

## **Current Principal Place of Business:**

1145 SAWGRASS CORP PKWY SUNRISE. FL 33323

## **Current Mailing Address:**

1145 SAWGRASS CORP PKWY SUNRISE, FL 33323

FEI Number: 65-1148121 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KATZMAN GARFINKEL & BERGER 5297 W. COPANS RD. MARGATE, FL 33063 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 SD Title PD

Name GADDY, KAREN Name RENAUD, RUDY

Address 1145 SAWGRASS CORP PKWY Address 1145 SAWGRASS CORP PKWY

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title VP Title D

Name JACOBS, JEFF Name PHILIPSON, ROBERT

Address 1145 SAWGRASS CORP PKWY Address 1145 SAWGRASS CORP PKWY

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title T Title I

Name LEIBER, CHARLES Name MASUR, SHAWN

Address 1145 SAWGRASS CORP PKWY Address 1145 SAWGRASS CORP PKWY

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title DIRECTOR

Name DELVECCHIO, CHARLES

Address 1145 SAWGRASS CORP PKWY

City-State-Zip: SUNRISE FL 33323

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: RUDY RENAUD PRESIDENT 01/21/2013