### 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006612

Entity Name: CORNER LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

FILED
Jun 30, 2020
Secretary of State
4547058828CC

# **Current Principal Place of Business:**

CHULUOTA ROAD AND CORNER LAKE DRIVE

ORLANDO, FL 32820

# **Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL 2300 MAITLAND CENTER PARKWAY SUITE 101 MAITLAND. FL 32751 US

FEI Number: 02-0563815 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

STAGE & ASSOCIATES 2295 SOUTH HIAWASSEE ROAD SUITE 403 ORLANDO, FL 32835 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: RICHARD ANDRADE 06/30/2020

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

TitleTREASURERTitleSECRETARYNameSULLIVAN, ADRIANNamePOPELAS, JOHN

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

2300 MAITLAND CENTER PARKWAY 2300 MAITLAND CENTER PARKWAY

SUITE 101 SUITE 101

City-State-Zip: MAITLAND FL 32751 City-State-Zip: MAITLAND FL 32751

Title VP Title PRESIDENT

Name HILL, KENNETH Name ANDRADE, RICHARD

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

2300 MAITLAND CENTER PARKWAY 2300 MAITLAND CENTER PARKWAY

SUITE 101 SUITE 101

City-State-Zip: MAITLAND FL 32751 City-State-Zip: MAITLAND FL 32751

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 PACHECO, ISRAEL
 Name
 GOMEZ, JUDY

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

2300 MAITLAND CENTER PARKWAY 2300 MAITLAND CENTER PARKWAY

SUITE 101 SUITE 101

City-State-Zip: MAITLAND FL 32751 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.

SIGNATURE: RICHARD ANDRADE PRESIDENT 06/30/2020