

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006612

Entity Name: CORNER LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

FILED
Feb 08, 2021
Secretary of State
8699523845CC

Current Principal Place of Business:

C/O FIRSTSERVICE RESIDENTIAL
2300 MAITLAND CENTER PKWY. SUITE 101
MAITLAND, FL 32751

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
7635 ASHLEY PARK COURT
SUITE 503
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

02/08/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name SULLIVAN, ADRIAN
Address C/O FIRSTSERVICE RESIDENTIAL
 2300 MAITLAND CENTER PARKWAY
 SUITE 101
City-State-Zip: MAITLAND FL 32751

Title SECRETARY
Name PEPELAS, JOHN
Address C/O FIRSTSERVICE RESIDENTIAL
 2300 MAITLAND CENTER PARKWAY
 SUITE 101
City-State-Zip: MAITLAND FL 32751

Title VP
Name HILL, KENNETH
Address C/O FIRSTSERVICE RESIDENTIAL
 2300 MAITLAND CENTER PARKWAY
 SUITE 101
City-State-Zip: MAITLAND FL 32751

Title PRESIDENT
Name ANDRADE, RICHARD
Address C/O FIRSTSERVICE RESIDENTIAL
 2300 MAITLAND CENTER PARKWAY
 SUITE 101
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name PACHECO, ISRAEL
Address C/O FIRSTSERVICE RESIDENTIAL
 2300 MAITLAND CENTER PARKWAY
 SUITE 101
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name GOMEZ, JUDY
Address C/O FIRSTSERVICE RESIDENTIAL
 2300 MAITLAND CENTER PARKWAY
 SUITE 101
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: ANDRADE , RICHARD

PRESIDENT

02/08/2021

Electronic Signature of Signing Officer/Director Detail

Date