

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007308

**FILED**  
**Apr 29, 2024**  
**Secretary of State**  
**8279021809CC**

**Entity Name:** THE MANORS AT EMERALD ISLAND RESORT HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6972 LAKE GLORIA BLVD.  
ORLANDO, FL 32809

**Current Mailing Address:**

6972 LAKE GLORIA BLVD.  
ORLANDO, FL 32809 US

**FEI Number: 01-0595408**

**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: REBECCA FURLOW

04/29/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name VASQUEZ, DAWN  
Address 6972 LAKE GLORIA BLVD.  
City-State-Zip: ORLANDO FL 32809

Title VP  
Name LECO, GERRY  
Address 6972 LAKE GLORIA BLVD.  
City-State-Zip: ORLANDO FL 32809

Title PRESIDENT  
Name WILSON, LESTER  
Address 6972 LAKE GLORIA BLVD.  
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR  
Name SHEPHERD, RONALD  
Address 6972 LAKE GLORIA BLVD.  
City-State-Zip: ORLANDO FL 32809

Title DIRECTOR  
Name LASHLEY, PATRICIA  
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: LESTER WILSON

PRESIDENT

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date