

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000000354

**Entity Name:** LAKE LETA TRACE ASSOCIATION, INC.

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC3223969603**

**Current Principal Place of Business:**

FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DR N STE 100  
SAINT PETERSBURG, FL 33716

**Current Mailing Address:**

FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DR N STE 100  
SAINT PETERSBURG, FL 33716 US

**FEI Number: 59-3719332**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WETHERINGTON, HAMILTON & HARRISON,P.A.  
1010 N FLORIDA AVE  
TAMPA, FL 33602 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 VP  
Name WILLIAMS, CHRISTOPHER  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DR N STE 100  
City-State-Zip: SAINT PETERSBURG FL 33716

Title PRESIDENT  
Name COLIN, HESTER CAROL  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DR N STE 100  
City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR  
Name MUGFORD, MELANIE  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DR N STE 100  
City-State-Zip: SAINT PETERSBURG FL 33716

Title SECRETARY  
Name CAPO , MARIVY  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DR N STE 100  
City-State-Zip: SAINT PETERSBURG FL 33716

Title TREASURER  
Name BARRINGER, JIMMY  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DR N STE 100  
City-State-Zip: SAINT PETERSBURG FL 33716

*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: HESTER CAROL COLIN**

**PRESIDENT**

**02/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date