

2022 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000002188

Entity Name: LOST RIVER PRESERVE PROPERTY OWNERS' ASSOCIATION, INC.**FILED**
Jan 03, 2022
Secretary of State
9890609826CR**Current Principal Place of Business:**409 E. COLLEGE AVE
RUSKIN, FL 33570**Current Mailing Address:**409 E. COLLEGE AVE.
RUSKIN, FL 33570 US**FEI Number: 52-2375980****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ELLIS, JONATHAN J. ESQ.
101 E. KENNEDY BLVD.
STE. 2800
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: JONATHAN J. ELLIS****01/03/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRESIDENT
Name MYLINDA, MAYE
Address 3414 GULF CITY RD
City-State-Zip: RUSKIN FL 33570**Title** VP
Name PEREZ, GLENNIS
Address 3834 GULF CITY RD
City-State-Zip: RUSKIN FL 33570**Title** TREASURER
Name BUZBEE, SCOTT
Address 3510 GULF CITY RD
City-State-Zip: RUSKIN FL 33570**Title** SECRETARY
Name GROAT, MICHELLE
Address 3102 SMILDON TRL
City-State-Zip: RUSKIN FL 33570**Title** DIRECTOR
Name CASEY, BILL
Address 3323 GULF CITY RD
City-State-Zip: RUSKIN FL 33570**Title** DIRECTOR
Name WHITTLE, ALEJANDRA
Address 3145 GULF CITY RD
City-State-Zip: RUSKIN FL 33570**Title** DIRECTOR
Name MINARY, CASSANDRA
Address PO BOX 286
City-State-Zip: PORT RICHEY FL 34673**Title** DIRECTOR
Name BUTLER, JACQUELINE
Address 3528 GULF CITY RD
City-State-Zip: RUSKIN FL 33570**Continues on page 2**

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: MYLINDA MAYE**PRESIDENT****01/03/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	DIXON, ANGELA
Address	320 PINE TERRACE DR.
City-State-Zip:	RUSKIN FL 33570