

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02116

Entity Name: LIME TREE VILLAGE COMMUNITY CLUB ASSOCIATION, INC.

FILED
Jan 23, 2017
Secretary of State
CC9415603013

Current Principal Place of Business:

5303 GATEWAY AVE.
ORLANDO, FL 32821

Current Mailing Address:

620 N WYMORE RD
SUITE 240
MAITLAND, FL 32751 US

FEI Number: 59-2440601

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARMSTRONG, JANICE C
620 N WYMORE RD
SUITE 240
MAITLAND, FL 32751 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: JANICE C ARMSTRONG

01/23/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GADD, BETTY
Address 5303 GATEWAY AVE
City-State-Zip: ORLANDO FL 32821

Title VP
Name JARRELLS, JACK
Address 5303 GATEWAY AVE
City-State-Zip: ORLANDO FL 32821

Title SECRETARY
Name HEBNER, BRANDON
Address 5303 GATEWAY AVE
City-State-Zip: ORLANDO FL 32821

Title TREASURER
Name PURDY, MARTHA
Address 5303 GATEWAY AVE
City-State-Zip: ORLANDO FL 32821

Title DIRECTOR 1
Name STERMAN, CAMILLE
Address 5303 GATEWAY AVE
City-State-Zip: ORLANDO FL 32821

Title DIRECTOR 2
Name DORIO-CAPOBIANCO, JILDA
Address 5303 GATEWAY AVE
City-State-Zip: ORLANDO FL 32821

Title DIRECTOR 3
Name ENDARA, SUSY
Address 5303 GATEWAY AVE
City-State-Zip: ORLANDO FL 32821

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: BETTY GADD

PRESIDENT

01/23/2017

Electronic Signature of Signing Officer/Director Detail

Date