## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02909

Entity Name: JEFFERSON PINES II CONDOMINIUM ASSOCIATION, INC.

FILED
Jan 10, 2019
Secretary of State
1363921024CC

## **Current Principal Place of Business:**

C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH ST.

OSPREY, FL 34229

## **Current Mailing Address:**

C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH ST. OSPREY, FL 34229 US

FEI Number: 59-2506209 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ULRICH, RICHARD ULRICH, SCARLETT, WICKMAN & DEAN, P.A. 713 S. ORANGE AVE. #201 SARASOTA, FL 34236 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 ULRICH 01/10/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

Title VP Title PRESIDENT

Name RICCARDO, KEN Name LEACOCK, BECKY

Address C/O LIGHTHOUSE PROPETY Address C/O LIGHTHOUSE PROPERTY

MANAGEMENT
16 CHURCH ST.
MANAGEMENT
16 CHURCH ST.

OSPREY FL 34229 City-State-Zip: OSPREY FL 34229

Title TREASURER Title SECRETARY

Name RICCARDO, KEN Name SONDGERATH, BILL

Address C/O LIGHTHOUSE PROPERTY Address C/O LIGHTHOUSE PROPERTY

MANAGEMENT
16 CHURCH ST.

MANAGEMENT
16 CHURCH ST.

City-State-Zip: OSPREY FL 34229 City-State-Zip: OSPREY FL 34229

Title DIRECTOR Title DIRECTOR

Name BERGIN, PATRICIA Name LISITZA, JEREMY

Address C/O LIGHTHOUSE PROPERTY Address C/O LIGHTHOUSE PROPERTY

MANAGMENT
16 CHURCH ST.
MANAGEMENT
16 CHURCH ST.

City-State-Zip: OSPREY FL 34229 City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name LYNN, CINDY

Name LINN, GINDT

Address C/O LIGHTHOUSE PROPERTY MANAGEMENT

16 CHURCH ST.

City-State-Zip: OSPREY FL 34229

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: BECKY LEACOCK PRESIDENT 01/10/2019