

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006555

Entity Name: LAKE SAWYER SOUTH COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

8390 CHAMPIONSGATE BLVD.
SUITE 304
CHAMPIONSGATE , FL 33896

Current Mailing Address:

8390 CHAMPIONSGATE BLVD.
SUITE 304
CHAMPIONSGATE , FL 33896 US

FEI Number: 74-3125873

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AEGIS COMMUNITY MANAGEMENT SOLUTIONS, INC.
8390 CHAMPIONSGATE BLVD., STE 304
CHAMPIONSGATE, FL 33896 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: DAVID L BURMAN

02/24/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BRIDGES, CLIFTON
Address 8390 CHAMPIONSGATE BLVD.
 SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896

Title VP
Name WILLIS, MARK
Address 8390 CHAMPIONSGATE BLVD.
 SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896

Title SECRETARY, TREASURER
Name TEPPER, JEFFREY
Address 8390 CHAMPIONSGATE BLVD.
 SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896

Title DIRECTOR
Name JOHNSON, JONATHAN
Address 8390 CHAMPIONSGATE BLVD.
 SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896

Title DIRECTOR
Name DIPINA, JAMES
Address 8390 CHAMPIONSGATE BLVD.
 SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896

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: CLIFTON BRIDGES

PRESIDENT

02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date