

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

DOCUMENT# N04000008081

**Entity Name:** LAKE MARY LACROSSE CLUB, INC.

**Current Principal Place of Business:**

3443 FERNLAKE PLACE  
LONGWOOD, FL 32779

**Current Mailing Address:**

3443 FERNLAKE PLACE  
LONGWOOD, FL 32779 US

**FEI Number:** 27-0103220

**Certificate of Status Desired:** No

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

GILE, CRAIG  
3443 FERNLAKE PLACE  
LONGWOOD, FL 32779 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:** CRAIG GILE

01/12/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                     |                 |                        |
|-----------------|---------------------|-----------------|------------------------|
| Title           | PRES                | Title           | VP                     |
| Name            | GILE, CRAIG         | Name            | LOMEDICO, TOM          |
| Address         | 3443 FERNLAKE PLACE | Address         | 1325 TADSWORTH TERRACE |
| City-State-Zip: | LONGWOOD FL 32779   | City-State-Zip: | HEATHROW FL 32746      |

*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:** CRAIG GILE

PRESIDENT

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date