

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011172

Entity Name: LAKEVIEW VILLAS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**15010 NW 173RD ST
ALACHUA, FL 32615**Current Mailing Address:**P.O. BOX 969
ALACHUA, FL 32616 US**FEI Number:** 20-3382770**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BURGESS MANAGEMENT SERVICES, LLC
15010 NW 173RD ST
ALACHUA, FL 32615 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:** SANDRA BURGESS

02/16/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY TREASURER
Name DIEHL, PEGGY
Address P.O. BOX 969
City-State-Zip: ALACHUA FL 32616

Title DIRECTOR
Name STIRLING, JACQUELINE
Address P.O. BOX 969
City-State-Zip: ALACHUA FL 32616

Title DIRECTOR
Name LEE, TROY
Address P.O. BOX 969
City-State-Zip: ALACHUA FL 32616

Title PRESIDENT
Name BARKER, SCOTT
Address P.O. BOX 969
City-State-Zip: ALACHUA FL 32616

Title DIRECTOR
Name RICHESON, MARCUS
Address P.O. BOX 969
City-State-Zip: ALACHUA FL 32616

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: SCOTT BARKER

PRESIDENT

02/16/2023

Electronic Signature of Signing Officer/Director Detail

Date