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: DANIEL O'DONNELL

Electronic Signature of Signing Officer/Director Detail

Current Principal Place of Business: 2541 N RESTON TERRACE HERNANDO, FL 34442

Entity Name: LAKEVIEW VILLAS P.O.A., INC.

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Mailing Address:

2541 N RESTON TERRACE HERNANDO, FL 34442 US

DOCUMENT# N04000011899

FEI Number: 20-2025447

Name and Address of Current Registered Agent:

VILLAGES SERVICES, INC. 2541 N RESTON TERRACE HERNANDO, FL 34442 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.

stered Agent		Date
Title	TREASURER	
Name	LADEMANN, DONALD R	
Address	2541 N RESTON TERRACE	
City-State-Zip:	HERNANDO FL 34442	
Title	VP	
Name	SOHL, BRANDON	
Address	2541 N RESTON TERRACE	
City-State-Zip:	HERNANDO FL 34442	
	Address City-State-Zip: Title Name Address	Address2541 N RESTON TERRACECity-State-Zip:HERNANDO FL 34442TitleVPNameSOHL, BRANDONAddress2541 N RESTON TERRACE

PRESIDENT

Certificate of Status Desired: No

FILED Apr 22, 2024 Secretary of State 6224845331CC

Date

04/22/2024