

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011899

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

Current Principal Place of Business:

2476 N. ESSEX AVE.
HERNANDO, FL 34442

Current Mailing Address:

2476 N. ESSEX AVE.
HERNANDO, FL 34442

FEI Number: 20-2025447

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABEL, ERIC D. ESQ.
2476 N. ESSEX AVE.
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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PD
Name CHRISTENSEN, ROBERT S
Address 2476 N. ESSEX AVE.
City-State-Zip: HERNANDO FL 34442

Title TD
Name PASTOR, JOHN E
Address 2476 N. ESSEX AVE.
City-State-Zip: HERNANDO FL 34442

Title SD
Name DRISKILL, DEB
Address 2476 N. ESSEX AVE.
City-State-Zip: HERNANDO FL 34442

Title D
Name JESWEIN, ROBERT E
Address 2476 N. ESSEX AVE.
City-State-Zip: HERNANDO FL 34442

Title D
Name COURTNEY, OVAL E
Address 2476 N. ESSEX AVE.
City-State-Zip: HERNANDO FL 34442

Title D
Name CARL, CHARLES
Address 2476 N. ESSEX AVE.
City-State-Zip: HERNANDO FL 34442

Title D
Name ABEL, ERIC D
Address 2476 N. ESSEX AVE.
City-State-Zip: HERNANDO FL 34442

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: ROBERT S. CHRISTENSEN

PRESIDENT

03/27/2014

Electronic Signature of Signing Officer/Director Detail

Date