#### 2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

### DOCUMENT# N04373

Entity Name: THE VILLAGE AT LAKE PINE II HOMEOWNERS' ASSOCIATION, INC.

# **Current Principal Place of Business:**

THE VILLAGE AT LAKE PINE II 1325 S.W. 120TH WAY DAVIE, FL 33325-3844

# **Current Mailing Address:**

THE VILLAGE AT LAKE PINE II 3303 W COMMERCIAL BOULEVARD SUITE 170 FORT LAUDERDALE, FL 33309 US

## FEI Number: 59-2451936

### Name and Address of Current Registered Agent:

EDWARD F. HOLODAK, P.A. 7951 SW 6TH STREET SUITE 210 PLANTATION, FL 33324 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: EDWARD F. HOLODAK, ESQ.				09/24/2018
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	VP, SECRETARY	Title	PD	
Name	BASTOS, JESSIE	Name	BEALE, CHERYL	
Address	11912 SW 11 COURT	Address	11903 SW 13 COURT	
City-State-Zip:	DAVIE FL 33325	City-State-Zip:	DAVIE FL 33325	
Title	OFFICER	Title	OFFICER	
Name	ARCHIPRETE, WINNIE	Name	FULWEBER, ROBERTA	
Address	1175 SW 120 WAY	Address	11877 SW 11 COURT	
City-State-Zip:	DAVIE FL 33325	City-State-Zip:	DAVIE FL 33325	
Title	D	Title	TREASURER	
Name	LEYLAND, ED	Name	SULLIVAN, MAUREEN	
Address	1300 SW 120 WAY	Address	1155 SW 118TH TERRACE	
City-State-Zip:	DAVIE FL 33325	City-State-Zip:	DAVIE FL 33325-3844	
Title	OFFICER			
Name	HILL, BRIAN			
Address	1155 SW 118TH TERRACE			
City-State-Zip:	DAVIE FL 33325			

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: CHERYL BEALE

#### PRESIDENT

## FILED Sep 24, 2018 Secretary of State CC1024113817

Certificate of Status Desired: No