

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007603

Entity Name: WYNDHAM LAKES ESTATES HOMEOWNERS ASSOCIATION, INC.**FILED**
Apr 09, 2019
Secretary of State
5909161964CC**Current Principal Place of Business:**6972 LAKE GLORIA BLVD
ORLANDO, FL 32809**Current Mailing Address:**6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 US**FEI Number: 20-4873418****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LELAND MANAGEMENT, INC.
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 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	DIRECTOR
Name	PENA, NELSON
Address	6972 LAKE GLORIA BLVD
City-State-Zip:	ORLANDO FL 32809

Title	PRESIDENT
Name	WILLIAMS, DEVAUGHN
Address	6972 LAKE GLORIA BLVD
City-State-Zip:	ORLANDO FL 32809

Title	SECRETARY
Name	POLLARD, JEANETTE
Address	6972 LAKE GLORIA BLVD
City-State-Zip:	ORLANDO FL 32809

Title	VP
Name	WALWYN, CELVIN
Address	6972 LAKE GLORIA BLVD
City-State-Zip:	ORLANDO FL 32809

Title	DIRECTOR
Name	BETANCOURT, ALEX
Address	6972 LAKE GLORIA BLVD
City-State-Zip:	ORLANDO FL 32809

Title	TREASURER
Name	STEUCK, DENNIS
Address	6972 LAKE GLORIA BLVD
City-State-Zip:	ORLANDO FL 32809

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: DEVAUGHN WILLIAMS**PRESIDENT****04/09/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date