

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N05000012711

**Entity Name:** LEE VISTA SQUARE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PKWY SUITE 101  
MAITLAND, FL 32751

**Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PKWY SUITE 101  
MAITLAND, FL 32751 US

**FEI Number:** 55-0913135

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SOLTAU-WOODS, ESQ., NICOLE  
2617 SOUTH FRENCH AVE  
SUITE C  
SANFORD, FL 32773 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:** NICOLE SOLTAU-WOODS, ESQ.

05/07/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name TOBON, JUAN  
Address C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PKWY  
SUITE 101  
City-State-Zip: MAITLAND FL 32751

Title PRESIDENT  
Name HAYNES, CARLUS  
Address C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PKWY  
SUITE 101  
City-State-Zip: MAITLAND FL 32751

Title SECRETARY, TREASURER  
Name CRUZ, CAROLINA  
Address C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PKWY  
SUITE 101  
City-State-Zip: MAITLAND FL 32751

*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:** CAROLINA CRUZ

SECRETARY/TREASURER 05/07/2021

Electronic Signature of Signing Officer/Director Detail

Date