2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001964

Entity Name: GOLF LAKE HOMEOWNERS' ASSOCIATION, INC.

FILED
Jan 31, 2020
Secretary of State
5340092995CC

Current Principal Place of Business:

C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE SUITE 260 CLEARWATER, FL 33762

Current Mailing Address:

C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR. SUITE 260 CLEARWATER, FL 33762 US

FEI Number: 20-4932937 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

APPLETON, REISS & SKOREWICZ, PLLC APPLETON, REISS & SKOREWICZ, PLLC 501 EAST KENNEDY BOULEVARD, SUITE 802 TAMPA, FL 33602 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: ERIC APPLETON 01/31/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

Title PRESIDENT, GL Title VF

Name LA BIANCA, JACQUELINE Name WILSON, ROBERT

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR. SUITE 260 3001 EXECUTIVE DR. SUITE 260

CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

 Title
 DIRECTOR
 Title
 SECRETARY

 Name
 GOEDECKE, CAROL
 Name
 PIAZZA, JOAN

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. SUITE 260 3001 EXECUTIVE DR. SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title TREASURER Title DIRECTOR

Name LENTSCH, SHARON Name SANTACOLOMA, HERNANDO

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. SUITE 260 3001 EXECUTIVE DR. SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR Title DIRECTOR

Name SYLVANOWICZ, WILLIAM R Name DELONG, TARA

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

SIGNATURE: JACQUELINE LA BIANCA

3001 EXECUTIVE DR. SUITE 260

PRESIDENT

01/31/2020

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.