

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

DOCUMENT# N06000006173

**Entity Name:** LAKE LINDA CIRCLE CO-OP, INC.

**Current Principal Place of Business:**

2036 LAKE LINDA CIRCLE  
LUTZ, FL 33558

**Current Mailing Address:**

2036 LAKE LINDA CIRCLE  
LUTZ, FL 33558

**FEI Number:** 20-5629429

**Certificate of Status Desired:** No

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

OLESKI, RONALD  
2013 LAKE LINDA CIRCLE  
LUTZ, FL 33558 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            SECRETARY  
Name            HIGGINS, DEB  
Address        2020 LAKE LINDA CIRCLE  
City-State-Zip: LUTZ FL 33558

Title            TREASURER  
Name            MCCALVEY, KEN  
Address        2109 LAKE LINDA CIRCLE  
City-State-Zip: LUTZ FL 33558

Title            BOARD MEMBER  
Name            TOSCANO, DAVID  
Address        2102 LAKE LINDA CIRCLE  
City-State-Zip: LUTZ FL 33558

Title            VICE PRESIDENT  
Name            PARSHALL, VICTORIA  
Address        2050 LAKE LINDA CIRCLE  
City-State-Zip: LUTZ FL 33558

Title            PRESIDENT  
Name            RANADO, MICHAEL  
Address        2046 LAKE LINDA CIRCLE  
City-State-Zip: LUTZ FL 33558

*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: KENNETH MCCALVEY**

**TREASURER**

**03/01/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date