## **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06134

Entity Name: LUCERNE AT WOODLANDS HOMEOWNERS' ASSOCIATION,

INC.

FILED
Apr 07, 2020
Secretary of State
1357160909CC

## **Current Principal Place of Business:**

327 OFFICE PLAZA DRIVE SUITE 211

TALLAHASSEE, FL 32301

## **Current Mailing Address:**

PO BOX 12412

TALLAHASSEE, FL 32317 US

FEI Number: 59-2589866 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ROWAND, TOM JR. 327 OFFICE PLAZA DRIVE SUITE 211 TALLAHASSEE, FL 32301 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: TOM ROWAND 04/07/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TREASURER, SECRETARY Title PRESIDENT

Name BREWER, DURWARD N Name BOLLMAN, THEODORE A

Address PO BOX 12412 Address PO BOX 12412

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

Title VP Title MGMT

Name CHIRICOS, JUSTIN Name ROWAND, TOM JR.

Address PO BOX 12412 Address P.O. BOX 12412

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

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: TOM ROWAND MANAGEMENT

Electronic Signature of Signing Officer/Director Detail

04/07/2020