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.

PRES

#### DOCUMENT# N06210

## Entity Name: LOVINS TOWNHOUSE CONDOMINIUM ASSOCIATION, INC.

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

2855 N UNIVERSITY DR STE 310 CORAL SPRINGS, FL 33065

### **Current Mailing Address:**

2855 N UNIVERSITY DR STE 310 CORAL SPRINGS, FL 33065 US

#### FEI Number: 59-2596155

## Name and Address of Current Registered Agent:

TUCKER & TIGHE, P.A. 800 E. BROWARD BLVD, SUITE 710 SUITE 710 FORT LAUDERDALE, FL 33301 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

Officer/Director Detail :					
Title	SECRETARY, TREASURER	Title	PRESIDENT		
Name	FOURNIER, PAUL	Name	WEBB, FRANCIS		
Address	4169 CORAL SPINGS DR	Address	CORAL SPRINGS DRIVE		
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065		

SIGNATURE: FRANCIS WEBB

I

Electronic Signature of Signing Officer/Director Detail

## FILED Jan 20, 2020 Secretary of State 4968171247CC

Certificate of Status Desired: No

01/20/2020 Date

Date