

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

DOCUMENT# N07367

**FILED**  
**Mar 30, 2020**  
**Secretary of State**  
**2760727542CC**

**Entity Name:** THE LAKES OF PGA NATIONAL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O SUNRISE PROPERTY & ESTATE MGT, LLC  
19940 MONA ROAD SUITE 5  
TEQUESTA, FL 33469

**Current Mailing Address:**

C/O SUNRISE PROPERTY & ESTATE MGT, LLC  
19940 MONA ROAD SUITE 5  
TEQUESTA, FL 33469 US

**FEI Number: 65-0052375**

**Certificate of Status Desired: No**

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

SUNRISE PROPERTY & ESTATE MGT, LLC  
C/O SUNRISE PROPERTY & ESTATE MGT, LLC  
19940 MONA ROAD SUITE 5  
TEQUESTA, FL 33469 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: SANDY ROBINSON**

**03/30/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name MILES, LORRAINE  
Address C/O SUNRISE PROPERTY & ESTATE MGT, LLC  
19940 MONA ROAD SUITE 5  
City-State-Zip: TEQUESTA FL 33469

Title VP  
Name SCOTT, LINDA  
Address C/O SUNRISE PROPERTY & ESTATE MGT, LLC  
19940 MONA ROAD SUITE 5  
City-State-Zip: TEQUESTA FL 33469

Title PRESIDENT  
Name CASELLA, CAROLE  
Address C/O SUNRISE PROPERTY & ESTATE MGT, LLC  
19940 MONA ROAD SUITE 5  
City-State-Zip: TEQUESTA FL 33469

Title TREASURER  
Name SNOWDEN, GAIL  
Address C/O SUNRISE PROPERTY & ESTATE MGT, LLC  
19940 MONA ROAD SUITE 5  
City-State-Zip: TEQUESTA FL 33469

*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: CAROLE CASELLA**

**PRESIDENT**

**03/30/2020**

Electronic Signature of Signing Officer/Director Detail

Date