

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002151

Entity Name: RESERVE AT MEADOW LAKE HOMEOWNERS ASSOCIATION, INC.**FILED**
Apr 28, 2019
Secretary of State
6899818474CC**Current Principal Place of Business:**225 S. WESTMONTE DR
SUITE 3310
ALTAMONTE SPRINGS, FL 32714**Current Mailing Address:**P.O. BOX 162147
ALTAMONTE SPRINGS, FL 32716 US**FEI Number: 26-4015761****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**VISTA COMMUNITY ASSOCIATION MANAGEMENT
225 S. WESTMONTE DR
SUITE 3310
ALTAMONTE SPRINGS, FL 32714 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:** TINA YAMADA**04/28/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	BEARDMAN, MATTHEW
Address	P.O. BOX 162147
City-State-Zip:	ALTAMONTE SPRINGS FL 32716

Title	VP
Name	CALLANAN, SUSANNE
Address	P.O. BOX 162147
City-State-Zip:	ALTAMONTE SPRINGS FL 32716

Title	SECRETARY
Name	ARNETT, PAUL
Address	P.O. BOX 162147
City-State-Zip:	ALTAMONTE SPRINGS FL 32716

Title	TREASURER
Name	PETERSON, DAVID
Address	P.O. BOX 162147
City-State-Zip:	ALTAMONTE SPRINGS FL 32716

Title	DIRECTOR
Name	REVELL, KEVIN
Address	P.O. BOX 162147
City-State-Zip:	ALTAMONTE SPRINGS FL 32716

Title	DIRECTOR
Name	FRANK, JEANEAN
Address	P.O. BOX 162147
City-State-Zip:	ALTAMONTE SPRINGS FL 32716

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: MATTHEW BEARDMAN**PRESIDENT****04/28/2019**

Electronic Signature of Signing Officer/Director Detail

Date