

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08136

FILED
Feb 26, 2015
Secretary of State
CC1111517392

Entity Name: ANGLERS COVE MOBILE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

944 REYNOLDS RD. LOT 142
LAKELAND, FL 33801

Current Mailing Address:

944 REYNOLDS RD. LOT 142
LAKELAND, FL 33801

FEI Number: 59-2428299

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATTOX, RAY
170 E. CENTRAL AVENUE
WINTER HAVEN, FL 33880 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 P
Name TROTTIER, JEFFREY SR.
Address 944 REYNOLDS RD LOT 151
City-State-Zip: LAKELAND FL 33801

Title VP
Name MATUSZAK, SHARON
Address 944 REYNOLDS RD LOT 187
City-State-Zip: LAKELAND FL 33801

Title T
Name COUSINEAU, MARILYN A
Address 944 REYNOLDS RD., LOT 7
City-State-Zip: LAKELAND FL 33801

Title D
Name WOOLSEY, WAYNE
Address 944 REYNOLDS RD LOT 68
City-State-Zip: LAKELAND FL 33801

Title D
Name ULANOSKY, NANCY
Address 944 REYNOLDS RD LOT 49
City-State-Zip: LAKELAND FL 33801

Title SECRETARY
Name REED, DEBBIE
Address 944 REYNOLDS RD LOT 143
City-State-Zip: LAKELAND FL 33801

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: MARILYN A. COUSINEAU

TREASURER

02/26/2015

Electronic Signature of Signing Officer/Director Detail

Date