## 2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N10000004201

Entity Name: TOWN HOMES AT OAK LANE HOMEOWNERS' ASSOCIATION,

INC

N.I.

Apr 17, 2019 Secretary of State 1397742771CC

**FILED** 

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

C/O FIRSTSERVICE RESIDENTIAL FLORIDA 5805 BLUE LAGOON DRIVE SUITE # 310 MIAMI, FL 33126

## **Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL FLORIDA 5805 BLUE LAGOON DRIVE SUITE # 310 MIAMI, FL 33126 US

FEI Number: 27-2470584 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SIEGFRIED, RIVERA, HYMAN, LERNER, DE LA TORRE, MARS & SOBEL, P.A. 201 ALHAMBRA CIRCLE 11TH FLOOR CORAL GABLES, FL 33134 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: SRHL 04/17/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title SECRETARY, DIRECTOR

Name ELIAS , STEVEN Name TIMIN, GARY

Address 7495 SW 56 COURT Address 7495 SW 56TH COURT

City-State-Zip: MIAMI FL 33143 City-State-Zip: MIAMI FL 33143

TitleDIRECTORTitleVP, DIRECTORNameANDERSON, GREGORYNameMILLER, WILLIAM

Address 7495 SW 56TH COURT Address 7495 SW 56TH COURT

City-State-Zip: MIAMI FL 33143 City-State-Zip: MIAMI FL 33143

Title TREASURER, DIRECTOR
Name MCCLASKEY, ELIZABETH

Address 7495 SW 56 CT
City-State-Zip: MIAMI FL 33143

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: STEVEN ELIAS PRESIDENT 04/17/2019