

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11841

Entity Name: LAUREL HOLLOW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

275 LAUREL HOLLOW DRIVE
NOKOMIS, FL 34275

Current Mailing Address:

C/O THE PAPER TRAIL
P.O. BOX 20752
SARASOTA, FL 34276 US

FEI Number: 59-2717070

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARNOLD, NORMAN
238 LAUREL HOLLOW DRIVE
NOKOMIS, FL 34275 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 PD
Name SCHOPFLOCHER, THOMAS
Address 286 LAUREL HOLLOW DR
City-State-Zip: NOKOMIS FL 34275

Title D
Name CUMBO, RICHARD F
Address 269 LAUREL HOLLOW DR
City-State-Zip: NOKOMIS FL 34275

Title VPD
Name SPRUNGER, BENJAMIN E
Address 300 LAUREL HOLLOW DRIVE
City-State-Zip: NOKOMIS FL 34275

Title TD
Name ARNOLD, NORMAN S
Address 238 LAUREL HOLLOW DR
City-State-Zip: NOKOMIS FL 34275

Title SD
Name ALICE F. PHILLIPS
Address 232 LAUREL HOLLOW DR
City-State-Zip: NOKOMIS FL 34275

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: NORMAN S. ARNOLD

TREASURER

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date