Electronic Signature of Signing Officer/Director Detail

PRESIDENT

Entity Name: COUNTRY LAKE PATIO HOMES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

6766 NW 199TH TERRACE HIALEAH, FL 33015

DOCUMENT# N11908

Current Mailing Address:

8200 NW 41 ST SUITE 200 DORAL, FL 33166 US

FEI Number: 65-0034598

Name and Address of Current Registered Agent:

ACUNA, ALBERT E ESQ. 782 NW 42 AVE SUITE 343 MIAMI, FL 33126 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

Officer/Director Detail :

VP	Title	PRESIDENT
HERRERA, VICTOR	Name	MIXCO, LOURDES
8200 NW 41 ST SUITE 200	Address	8200 NW 41 ST SUITE 200
DORAL FL 33166	City-State-Zip:	DORAL FL 33166
DIRECTOR	Title	TREASURER
FLEMMINGS, REYNALDO	Name	FERNANDEZ, ELADIA
8200 NW 41 ST SUITE 200	Address	8200 NW 41 ST SUITE 200
DORAL FL 33166	City-State-Zip:	DORAL FL 33166
SECRETARY	Title	DIRECTOR
FARINAS, JOHANNA	Name	ESPINAL, FRANCISA
8200 NW 41 ST SUITE 200	Address	8200 NW 41 ST SUITE 200
DORAL FL 33166	City-State-Zip:	DORAL FL 33166
DIRECTOR		
GEORGE, CARLOS		
8200 NW 41 ST SUITE 200		
DORAL FL 33166		
	VP HERRERA, VICTOR 8200 NW 41 ST SUITE 200 DORAL FL 33166 DIRECTOR FLEMMINGS, REYNALDO 8200 NW 41 ST SUITE 200 DORAL FL 33166 SECRETARY FARINAS, JOHANNA 8200 NW 41 ST SUITE 200 DORAL FL 33166 DIRECTOR GEORGE, CARLOS 8200 NW 41 ST SUITE 200	VPTitleHERRERA, VICTORName8200 NW 41 ST SUITE 200AddressDORAL FL 33166City-State-Zip:DIRECTORTitleFLEMMINGS, REYNALDOName8200 NW 41 ST SUITE 200AddressDORAL FL 33166City-State-Zip:SECRETARYTitleFARINAS, JOHANNAName8200 NW 41 ST SUITE 200AddressDORAL FL 33166City-State-Zip:SECRETARYTitleFARINAS, JOHANNAName8200 NW 41 ST SUITE 200City-State-Zip:DIRECTORCity-State-Zip:BIRECTORSeconder State-Sip:DIRECTORSeconder State-Sip:DIRECTORSeconder State-Sip:DIRECTORSeconder State-Sip:B200 NW 41 ST SUITE 200Seconder State-Sip:DIRECTORSeconder State-Sip:DIRECTORSeconder State-Sip:B200 NW 41 ST SUITE 200Seconder State-Sip:B200 NW 41 ST<

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

FILED

Dec 18, 2018

Secretary of State CC1568762490

Certificate of Status Desired: No

Date

Date

2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

above, or on an attachment with all other like empowered.

SIGNATURE: LOURDES MIXCO

12/18/2018