

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000009909

**Entity Name:** LEPARC HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1320 N SEMORAN BLVD, STE 100  
ORLANDO, FL 32807

**Current Mailing Address:**

1320 N SEMORAN BLVD, STE 100  
ORLANDO, FL 32807 US

**FEI Number: 46-2398120**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

TOWERS PROPERTY MANAGEMENT, INC.  
1320 N. SEMORAN BLVD., STE 100  
ORLANDO, FL 32807 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            PRESIDENT  
Name            KORN, LAUREN  
Address        1320 N SEMORAN BLVD, STE 100  
City-State-Zip: ORLANDO FL 32807

Title            DIRECTOR  
Name            ANDERSON, BRIAN  
Address        1320 N SEMORAN BLVD, STE 100  
City-State-Zip: ORLANDO FL 32807

Title            SECRETARY, TREASURER  
Name            SHAUGHNESSY, PATRICK  
Address        1320 N SEMORAN BLVD, STE 100  
City-State-Zip: ORLANDO FL 32807

*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: LAUREN KORN**

**PRESIDENT**

**04/05/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date