

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12930

Entity Name: LAKES AT LEESBURG RESIDENTS ASSOCIATION, INC.**Current Principal Place of Business:**9 LATTICE DRIVE
LEESBURG, FL 34788**Current Mailing Address:**9 LATTICE DRIVE
LEESBURG, FL 34788 US**FEI Number:** 59-2623495**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARRY, JAMES
9 LATTICE DRIVE
LEESBURG, FL 34788 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:** JAMES BARRY

01/18/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HARTSBURG, ELIZABETH
Address 61 LATTICE DRIVE
City-State-Zip: LEESBURG FL 34788

Title VP
Name KEMP, GARY
Address 49 SEA FERN DR
City-State-Zip: LEESBURG FL 34788

Title VP, 2
Name WOLFE, MARGARET
Address 66 BUCCANEER DRIVE
City-State-Zip: LEESBURG FL 34788

Title SECRETARY
Name MINER, ARLENE
Address 58 SEA FERN DRIVE
City-State-Zip: LEESBURG FL 34788

Title TREASURER
Name BARRY, JAMES
Address 9 LATTICE DRIVE
City-State-Zip: LEESBURG FL 34788

Title ASSISTANT TREASURER
Name SHEA, CAROL
Address 11 LATTICE DRIVE
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name CARTER, JOANN
Address 40 SEA FERN DRIVE
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name LANNING, JEFFREY
Address 18 KEY LARGO WAY
City-State-Zip: LEESBURG FL 34788

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: JAMES BARRY

TREASURER

01/18/2017

Electronic Signature of Signing Officer/Director Detail

Date