Current Prin	: JOHN'S LAKE PROPERTY OWNERS AS Incipal Place of Business: LOW POINT PRINGS, FL 32714		4153420279CC
Current Mai	ling Address:		
	iollow point E springs, FL 32714 US		
FEI Number: 46-2556768		Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:		
1000 PINE HOL	NAGEMENT COMPANY LOW POINT PRINGS, FL 32714 US		
The above named	l entity submits this statement for the purpose of changing its r	egistered office or regis	tered agent, or both, in the State of Florida.
SIGNATURE	BRETT M JORDAN		02/24/2022
	Electronic Signature of Registered Agent		Date
Officer/Dire			Date
Officer/Dire		Title	Date D/VP
	ctor Detail :	Title Name	
Title	ctor Detail : D/P		D/VP
Title Name Address	ctor Detail : D/P FANT, JAMES H	Name	D/VP RILEY, BRANNON
Title Name Address	Ctor Detail : D/P FANT, JAMES H 1000 PINE HOLLOW POINT	Name Address	D/VP RILEY, BRANNON 1000 PINE HOLLOW POINT
Title Name Address City-State-Zip:	Ctor Detail : D/P FANT, JAMES H 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS FL 32714	Name Address City-State-Zip:	D/VP RILEY, BRANNON 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS FL 32714
Title Name Address City-State-Zip: Title	Ctor Detail : D/P FANT, JAMES H 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS FL 32714 TREASURER	Name Address City-State-Zip: Title	D/VP RILEY, BRANNON 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS FL 32714 DIRECTOR
Title Name Address City-State-Zip: Title Name Address	Ctor Detail : D/P FANT, JAMES H 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS FL 32714 TREASURER GOUVEIA, JESSE	Name Address City-State-Zip: Title Name	D/VP RILEY, BRANNON 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS FL 32714 DIRECTOR MAXWELL, TRAVIS 1000 PINE HOLLOW POINT
Title Name Address City-State-Zip: Title Name Address	Ctor Detail : D/P FANT, JAMES H 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS FL 32714 TREASURER GOUVEIA, JESSE 1000 PINE HOLLOW POINT	Name Address City-State-Zip: Title Name Address	D/VP RILEY, BRANNON 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS FL 32714 DIRECTOR MAXWELL, TRAVIS 1000 PINE HOLLOW POINT

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 FANT

Address

Electronic Signature of Signing Officer/Director Detail

02/24/2022

Date

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT FILED

Entity Name: JOHN'S LAKE PROPERTY OWNERS ASSOCIATION, INC.

1000 PINE HOLLOW POINT

City-State-Zip: ALTAMONTE SPRINGS FL 32714

DOCUMENT# N13000003588

Feb 24, 2022 **Secretary of State**