## 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: DANIEL JACOBSON

Electronic Signature of Signing Officer/Director Detail

Entity Name: 9 LAKERIDGE HOA, INC.

### **Current Principal Place of Business:**

401 EAST LAS OLAS BLVD., SUITE 130 FORT LAUDERDALE. FL 33301

DOCUMENT# N1300008115

#### **Current Mailing Address:**

401 EAST LAS OLAS BLVD., SUITE 130 FORT LAUDERDALE. FL 33301 US

### FEI Number: NOT APPLICABLE

# Name and Address of Current Registered Agent:

JACOBSON, DANIEL A 901 S FEDERAL HIGHWAY SUITE 201 FORT LAUDERDALE, FL 33316 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

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Officer/Director Detail :**

Title	Р	Title	VP
Name	SPOSA, CHRISTINE	Name	JACOBSON, DANIEL
Address	401 EAST LAS OLAS BLVD., SUITE 130	Address	901 S FEDERAL HWY, SUITE 201
City-State-Zip:	FORT LAUDERDALE FL 33301	City-State-Zip:	FORT LAUDERDALE FL 33316

Certificate of Status Desired: No

FILED Apr 29, 2014 Secretary of State CC0461186225

Date

04/29/2014

Date