

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000000451

**Entity Name:** LAKELAND ASSOCIATION OF REALTORS FOUNDATION INC

**Current Principal Place of Business:**

619 E. ORANGE STREET  
LAKELAND, FL 33801

**Current Mailing Address:**

619 E. ORANGE STREET  
LAKELAND, FL 33801 US

**FEI Number:** 59-3331721

**Certificate of Status Desired:** Yes

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

WATSON, STEPHEN C ESQ  
ONE LAKE MORTON DRIVE  
LAKELAND, FL 33802 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            VREELAND, J KYLE  
Address        114 N. TENNESSEE AVE.  
City-State-Zip: LAKELAND FL 33801

Title            OFFICER  
Name            CASTANET, LISA R  
Address        619 E. ORANGE STREET  
City-State-Zip: LAKELAND FL 33801

Title            SECRETARY  
Name            CORNELL, SHANNON  
Address        619 E. ORANGE STREET  
City-State-Zip: LAKELAND FL 33801

Title            CEO  
Name            BARNES, BARBARA A  
Address        619 E. ORANGE STREET  
City-State-Zip: LAKELAND FL 33801

Title            TREASURER  
Name            HANNA, MARIE  
Address        619 E. ORANGE STREET  
City-State-Zip: LAKELAND FL 33801

*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:** BARBARA A BARNES

**CEO**

**01/29/2018**

Electronic Signature of Signing Officer/Director Detail

Date