

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000002807

**Entity Name:** LAUREATE PARK VILLAGE CENTER PROPERTY OWNERS ASSOCIATION, INC.

**FILED**  
**Apr 18, 2019**  
**Secretary of State**  
**7847971824CC**

**Current Principal Place of Business:**

6900 TAVISTOCK LAKES BLVD., STE. 200  
ORLANDO, FL 32827

**Current Mailing Address:**

6900 TAVISTOCK LAKES BLVD., STE. 200  
ORLANDO, FL 32827

**FEI Number: 82-4699303**

**Certificate of Status Desired: No**

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

NATIONAL REGISTERED AGENTS, INC.  
1200 S PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PETER F. SOUZA, ASSISTANT SECRETARY**

**04/18/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P,D  
Name PEEK, SCOTT I JR  
Address 6900 TAVISTOCK LAKES BLVD., STE.  
200  
City-State-Zip: ORLANDO FL 32827

Title VPTD  
Name ADAMS, ROBERT  
Address 6900 TAVISTOCK LAKES BLVD., STE.  
200  
City-State-Zip: ORLANDO FL 32827

Title VPSD  
Name RENCORET, MICHELLE  
Address 6900 TAVISTOCK LAKES BLVD., STE.  
200  
City-State-Zip: ORLANDO FL 32827

*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: SCOTT I. PEEK, JR.**

**PRESIDENT**

**04/18/2019**

Electronic Signature of Signing Officer/Director Detail

Date