| FEI Number: 59-2179728<br>Name and Address of Current Registered Agent:  |  |                 | Certificate of Status Desired: No |            |
|--|--|-----------------|-----------------------------------|------------|
| SENTRY MANAGEMENT INC<br>2180 WEST SR 434 STE 5000<br>LONGWOOD, FL 32779 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  | BRADLEY POMP                             |                 |                                   | 02/21/2024 |
|  | Electronic Signature of Registered Agent |                 |                                   | Date       |
| Officer/Director Detail :  |  |                 |                                   |            |
| Title  | PRESIDENT, DIRECTOR                      | Title           | VP, DIRECTOR                      |            |
| Name   | FORD, TIMOTHY                            | Name            | RODRIGUEZ, MELVYN                 |            |
| Address  | 2180 WEST SR 434 STE 5000                | Address         | 2180 WEST SR 434 STE 5000         |            |
| City-State-Zip:  | LONGWOOD FL 32779                        | City-State-Zip: | LONGWOOD FL 32779                 |            |
| Title  | SECRETARY, TREASURER,<br>DIRECTOR        |                 |                                   |            |
| Name   | PICARIELL CHIN, NATALIA                  |                 |                                   |            |
| Address  | 2180 WEST SR 434 STE 5000                |                 |                                   |            |
| City-State-Zip:  | LONGWOOD FL 32779                        |                 |                                   |            |

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: TIMOTHY FORD

Electronic Signature of Signing Officer/Director Detail

Entity Name: LAKESIDE APOPKA HOMEOWNERS ASSOCIATION, INC.

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

2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779

DOCUMENT# N19000001740

### **Current Mailing Address:**

2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779 US

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# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

02/21/2024

Feb 21, 2024 **Secretary of State** 4944403449CC

FILED

PRESIDENT

Date