

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000011915

**Entity Name:** TERRACE VI AT LAKEWOOD NATIONAL CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 22, 2021**  
**Secretary of State**  
**9518347614CC**

**Current Principal Place of Business:**

10481 SIX MILE CYPRESS PARKWAY  
FORT MYERS, FL 33966

**Current Mailing Address:**

10481 SIX MILE CYPRESS PARKWAY  
FORT MYERS, FL 33966 US

**FEI Number: 84-3748266**

**Certificate of Status Desired: No**

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

TROPICAL ISLES MANAGEMENT SERVICES, INC  
12734 KENWOOD LANE  
SUITE 49  
FORT MYERS, FL 33907 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: DON ROEDDING**

**03/22/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D,P  
Name KORATICH, MATTHEW  
Address 10481 SIX MILE CYPRESS PARKWAY  
City-State-Zip: FORT MYERS FL 33966

Title DST  
Name NEGIP, DAVID  
Address 10481 SIX MILE CYPRESS PARKWAY  
City-State-Zip: FORT MYERS FL 33966

Title DVP  
Name ROUGHGARDEN, GREGORY  
Address 10481 SIX MILE CYPRESS PARKWAY  
City-State-Zip: FORT MYERS FL 33966

Title ASST. SECRETARY  
Name TOMBAUGH, LISA  
Address 345 INTERSTATE BLVD.  
City-State-Zip: SARASOTA FL 34240

*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: LISA TOMBAUGH**

**COMMUNITY MANAGER**

**03/22/2021**

Electronic Signature of Signing Officer/Director Detail

Date