1440 PENINSU TAVARES, FL				
Current Mai	ling Address:			
	SULA DRIVE FL 32778 US			
FEI Number: 84-3901917		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
LEONARD, CH 1440 PENINSU TAVARES, FL	LA DRIVE			
The above name	l entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of	Florida.
	l entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of	Florida. 03/27/2023
		stered office or regis	tered agent, or both, in the State of	
	CHARLES LEONARD Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of	03/27/2023
SIGNATURE	CHARLES LEONARD Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of	03/27/2023
SIGNATURE Officer/Dire	CHARLES LEONARD Electronic Signature of Registered Agent ctor Detail :			03/27/2023
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent Ctor Detail : P	Title	VP	03/27/2023
SIGNATURE Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : P BOUNDS, TERRELL 1590 PENINSULA DR	Title Name	VP SCHLIMGEN, DENNY 1600 PENINSULA DR	03/27/2023
SIGNATURE Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P BOUNDS, TERRELL 1590 PENINSULA DR	Title Name Address	VP SCHLIMGEN, DENNY 1600 PENINSULA DR	03/27/2023
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : P BOUNDS, TERRELL 1590 PENINSULA DR TAVARES FL 32778	Title Name Address	VP SCHLIMGEN, DENNY 1600 PENINSULA DR	03/27/2023
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : P BOUNDS, TERRELL 1590 PENINSULA DR TAVARES FL 32778 VP/S	Title Name Address	VP SCHLIMGEN, DENNY 1600 PENINSULA DR	03/27/2023

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE PENINSULA LAKE COUNTY HOMEOWNERS GROUP, INC.

DOCUMENT# N19000012294

Current Principal Place of Business:

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.

RA

SIGNATURE: CHARLES LEONARD

Electronic Signature of Signing Officer/Director Detail

03/27/2023

Date

FILED Mar 27, 2023

Secretary of State

1736980444CC