

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19106

Entity Name: COLONNADES PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4800 COLONNADES CLUB BOULEVARD
LAKELAND, FL 33811**Current Mailing Address:**4800 COLONNADES CLUB BOULEVARD
LAKELAND, FL 33811**FEI Number:** 59-2769860**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HILL, CRAIG BATTY
625 EAST LIME STREET
SUITE 5
LAKELAND, FL 33801 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	PD
Name	MERRILL, SANDRA PRESIDENT
Address	1947 BIRCHWOOD LOOP
City-State-Zip:	LAKELAND FL 33811

Title	VPD
Name	HUBER, ROBERT VICE-PRESIDENT
Address	1631 COLONNADES CIRCLE, NORTH
City-State-Zip:	LAKELAND FL 33811

Title	TD
Name	CROCKER, DEBORAH
Address	1635 BIRCHWOOD LOOP
City-State-Zip:	LAKELAND FL 33811

Title	SD
Name	BRICKEY, BOBBIE
Address	4916 COLONNADES CLUB BLVD.
City-State-Zip:	LAKELAND FL 33811

Title	DIRECTOR
Name	BLOCK, JAMES DIRECTOR
Address	4889 COLONNADES CIRCLE WEST
City-State-Zip:	LAKELAND FL 33811

Title	D
Name	BROWN, RAYMOND DIRECTOR
Address	4831 COLONNADES CIRCLE, WEST
City-State-Zip:	LAKELAND FL 33811

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: DEBORAH CROCKER**TREASURER****05/27/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date