

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21365

Entity Name: FALCON'S LEA PATIO HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**14950 NORFOLK LANE
DAVIE, FL 33331**Current Mailing Address:**14950 NORFOLK LANE
DAVIE, FL 33331 US**FEI Number:** 65-0026751**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SANFORD, JEFF
6111 SWINDEN LANE
DAVIE, FL 33331 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	P
Name	SANFORD, JEFF
Address	6111 SWINDEN LANE
City-State-Zip:	DAVIE FL 33331

Title	S
Name	PRICE, KATHY
Address	15160 NORFOLK LANE
City-State-Zip:	DAVIE FL 33331

Title	T
Name	POOLE, KELLEY
Address	6060 SWINDEN LANE
City-State-Zip:	DAVIE FL 33331

Title	VP
Name	BURFEINDT, ROBIN
Address	6160 MANCHESTER LANE
City-State-Zip:	DAVIE FL 33331

Title	DIRECTOR
Name	TAVELLA, CHRIS
Address	6140 PORTSMOUTH LANE
City-State-Zip:	DAVIE FL 33331

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: KELLEY POOLE**TREASURER****01/11/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date