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.	

TREASURER

SIGNATURE: KELLEY POOLE

Electronic Signature of Signing Officer/Director Detail

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

Name and Address of Current Registered Agent:

SANFORD, JEFF 6111 SWINDEN LANE DAVIE, FL 33331 US FILED Jan 29, 2023 Secretary of State 1349247474CC

Date

01/29/2023

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	P	Title	т
Name	SANFORD, JEFF	Name	POOLE, KELLEY
Address	6111 SWINDEN LANE	Address	6060 SWINDEN LANE
City-State-Zip:	DAVIE FL 33331	City-State-Zip:	DAVIE FL 33331
Title	VP	Title	DIRECTOR
Title Name	VP BURFEINDT, ROBIN	Title Name	DIRECTOR TAVELLA, CHRIS