Current Mai	ling Address:			
P.O. BOX 11 TALLAHASS	005 EE, FL 32302			
FEI Number: 59-2907788			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
	, FL 32317 US	torod office or rocio	torad agost or both in the State of Ele	rida
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: KIM SHAW 04/24/2023				
SIGNATURE				04/24/2023
	Electronic Signature of Registered Agent			Date
Officer/Dire				Date
Officer/Dire		Title	DVP	Date
	ctor Detail :	Title Name	DVP MELNICK, RACHEL	Date
Title	ctor Detail : DP			Date
Title Name	Ctor Detail : DP PRUETT, CHANTEL 1800 VINELAND LANE	Name	MELNICK, RACHEL 1864 VINELAND LN	Date
Title Name Address	Ctor Detail : DP PRUETT, CHANTEL 1800 VINELAND LANE	Name Address	MELNICK, RACHEL 1864 VINELAND LN	Date
Title Name Address City-State-Zip:	Ctor Detail : DP PRUETT, CHANTEL 1800 VINELAND LANE TALLAHASSEE FL 32317	Name Address City-State-Zip:	MELNICK, RACHEL 1864 VINELAND LN TALLAHASSEE FL 32317	Date
Title Name Address City-State-Zip: Title	C tor Detail : DP PRUETT, CHANTEL 1800 VINELAND LANE TALLAHASSEE FL 32317	Name Address City-State-Zip: Title	MELNICK, RACHEL 1864 VINELAND LN TALLAHASSEE FL 32317 S	Date

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: KIM SHAW

TREASURER

04/24/2023

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24065

Entity Name: LAFAYETTE ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1839 VINELAND LANE TALLAHASSEE, FL 32317

С

F

N

FILED Apr 24, 2023 Secretary of State 0336247137CC

Electronic Signature of Signing Officer/Director Detail

Date