

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30884

**FILED
Mar 18, 2020
Secretary of State
9372058987CC**

Entity Name: LAKEFIELD NORTH AT WELLINGTON HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

FIRST SERVICE RESIDENTIAL
12794 W. FOREST HILL BLVD. SUITE 31
WELLINGTON, FL 33414

Current Mailing Address:

FIRST SERVICE RESIDENTIAL
12794 W. FOREST HILL BLVD. SUITE 31
WELLINGTON, FL 33414 US

FEI Number: 65-0242589

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COPPLE, SACHS, COPPLE PA
11780 US HIGHWAY 1
SUITE 105
PALM BEACH GARDENS, FL 33408 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: RYAN COPPLE

03/18/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SALZMAN, ELYSE
Address 12794 W. FOREST HILL BLVD, SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title VP
Name CIOFFI, STEVEN
Address 12794 W. FOREST HILL BLVD, SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title PRESIDENT
Name GASSO, ROBYN
Address 12794 W. FOREST HILL BLVD, SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title TREASURER
Name ABBATE, DENIS
Address 12794 W. FOREST HILL BLVD, SUITE 31
City-State-Zip: WELLINGTON FL 33414

Title SECRETARY
Name HESSER, DALE
Address 12794 W. FOREST HILL BLVD, SUITE 31
City-State-Zip: WELLINGTON FL 33414

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: DALE HESSER

SECRETARY

03/18/2020

Electronic Signature of Signing Officer/Director Detail

Date