

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32773

Entity Name: LAKE MARIAM HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

511 LAKE MARIAM TERRACE
WINTER HAVEN, FL 33884

Current Mailing Address:

POST OFFICE BOX 7374
WINTER HAVEN, FL 33883-7374 US

FEI Number: 59-3015519

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OVALLE, TOM
511 LAKE MARIAM TERRACE
WINTER HAVEN, FL 33884 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 OVALLE, TOM
Address 511 LAKE MARIAM TERRACE
City-State-Zip: WINTER HAVEN FL 33884

Title VPD
Name COFFMAN, TIM
Address 117 LAKE MARIAM WAY
City-State-Zip: WINTER HAVEN FL 33884

Title TD
Name GRAY, KATHRYN
Address 124 LAKE MARIAM WAY
City-State-Zip: WINTER HAVEN FL 33884

Title SD
Name GIPSON, VALERIE
Address 317 LAKE MARIAM BLVD
City-State-Zip: WINTER HAVEN FL 33884

Title BD
Name MCCOY, DON
Address 514 LAKE MARIAM TERRACE
City-State-Zip: WINTER HAVEN FL 33884

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: KATHRYN GRAY

TD

04/27/2014

Electronic Signature of Signing Officer/Director Detail

Date