

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33810

**Entity Name:** BISHOPSCOURT AT THE OAKS PRESERVE ASSOCIATION, INC.**FILED**  
**Jan 30, 2019**  
**Secretary of State**  
**5418988437CC****Current Principal Place of Business:**C/O LIGHTHOUSE PROPERTY MANAGEMENT  
16 CHURCH STREET  
OSPREY, FL 34229**Current Mailing Address:**C/O LIGHTHOUSE PROPERTY MANAGEMENT  
16 CHURCH STREET  
OSPREY, FL 34229 US**FEI Number: 59-0897347****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KELLOGG, ALFRED  
16 CHURCH STREET  
OSPREY, FL 34229 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:** ALFRED KELLOGG

01/30/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	KELLOGG, ALFRED
Address	C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH STREET
City-State-Zip:	OSPREY FL 34229

Title	DIRECTOR
Name	SUHR, EBERHARD
Address	C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH STREET
City-State-Zip:	OSPREY FL 34229

Title	VP
Name	FORD, TIM
Address	C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH STREET
City-State-Zip:	OSPREY FL 34229

Title	VP, TREASURER, SECRETARY
Name	SPYCHER, SABINE
Address	C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH STREET
City-State-Zip:	OSPREY FL 34229

Title	DIRECTOR
Name	SOUTHORN, MALCOLM
Address	C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH STREET
City-State-Zip:	OSPREY FL 34229

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:** ALFRED KELLOGG**PRESIDENT**

01/30/2019

Electronic Signature of Signing Officer/Director Detail

Date