

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34845

Entity Name: COLONIAL LAKES HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**4962 N. PALM AVE
WINTER PARK, FL 32792**Current Mailing Address:**P.O. BOX 4129
WINTER PARK, FL 32793 US**FEI Number:** 59-3140946**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FRASCA, JOSEPH
C/O PREFERRED COMMUNITY MANAGEMENT
4962 N. PALM AVE
WINTER PARK, FL 32792-9111 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	DIRECTOR, VP
Name	AVILES, WILLIE
Address	P.O. BOX 4129
City-State-Zip:	WINTER PARK FL 32793

Title	DIRECTOR, TREASURER
Name	HERNANDEZ, MARIEMMA
Address	P.O. BOX 4129
City-State-Zip:	WINTER PARK FL 32793

Title	DIRECTOR, PRESIDENT
Name	RIVERA, JOVANI
Address	P.O. BOX 4129
City-State-Zip:	WINTER PARK FL 32793

Title	DIRECTOR, SECRETARY
Name	CACERES , OSIRIS
Address	P.O. BOX 4129
City-State-Zip:	WINTER PARK FL 32793

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: RIVERA , JOVANI

PRESIDENT

02/03/2022

Electronic Signature of Signing Officer/Director Detail_____
Date