

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38640

FILED
Mar 14, 2014
Secretary of State
CC2443125074

Entity Name: INTERLOCHEN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8390 CHAMPIONSGATE BLVD
SUITE 304
CHAMPIONSGATE, FL 33896

Current Mailing Address:

8390 CHAMPIONSGATE BLVD
SUITE 304
CHAMPIONSGATE, FL 33896 US

FEI Number: 65-0212524

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AEGIS COMMUNITY MANAGEMENT SOLUTIONS, INC.
8390 CHAMPIONSGATE BLVD STE 304
CHAMPIONSGATE, FL 33896 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
Name LYLE, GEORGE
Address 8390 CHAMPIONSGATE BLVD STE 304
City-State-Zip: CHAMPIONSGATE FL 33896

Title DIRECTOR
Name WINDSOR, ANN
Address 8390 CHAMPIONS GATE BLVD. #304
City-State-Zip: CHAMPIONS GATE FL 33896

Title DIRECTOR
Name MANCINI, ANTHONY DR.
Address 8390 CHAMPIONSGATE BLVD SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896

Title DIRECTOR
Name NEAL , CHRIS
Address 8390 CHAMPIONSGATE BLVD SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896

Title DIRECTOR
Name ORCUTT, PAULA
Address 8390 CHAMPIONSGATE BLVD SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896

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: GEORGE LYLE

DIRECTOR

03/14/2014

Electronic Signature of Signing Officer/Director Detail

Date