Auuress.			
OX 772243 32877-2243 US			
2937141		Certificate of Status Desired:	No
ess of Current Registered Agent:			
IA RIVE 7 US			
submits this statement for the purpose of changing its regist	ered office or regis	tered agent, or both, in the State of Florida.	
ectronic Signature of Registered Agent			Date
ectronic Signature of Registered Agent			Date
	Title	STD	Date
	Title Name		Date
Detail :		STD	Date
Detail : HMAN, DAVID	Name	STD MIRANDA, CHRISTINA PO BOX 772243	Date
	29377-2243 US 2937141 ss of Current Registered Agent: A RIVE ' US	29377-2243 US 2937141 ss of Current Registered Agent: A RIVE ' US	29377-2243 US Certificate of Status Desired: ss of Current Registered Agent: A RIVE

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39058

Entity Name: HOMEOWNERS ASSOCIATION OF SKY LAKE SOUTH UNITS SIX AND SEVEN, INC.

Current Principal Place of Business:

3055 RAMSGATE CIRCLE ORLANDO, FL 32837

Name

Address

City-State-Zip:

Current Mailing Address:

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.

STD

SIGNATURE: CHRISTINA MIRANDA	
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RHOADS, SUSAN VPD

ORLANDO FL 32877-2243

PO BOX 772243

Electronic Signature of Signing Officer/Director Detail

FILED Mar 15, 2017 Secretary of State CC3867617490

03/15/2017 Date