

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N44099

**FILED  
Mar 09, 2020  
Secretary of State  
6200665129CC**

**Entity Name:** TOWER LAKES HOMEOWNERS ASSOCIATION OF LAKE WALES, INC.

**Current Principal Place of Business:**

328 DOVE CT  
LAKE WALES, FL 33859

**Current Mailing Address:**

328 DOVE CT  
LAKE WALES, FL 33859 US

**FEI Number: 59-3079446**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

COLLING, LEE JAY  
529 VERSAILLES DRIVE  
SUITE 103  
MAITLAND, FL 32751 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: LEE JAY COLLING**

**03/09/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name MCDERMED, STEVE  
Address 352 GUALL LANE  
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR, VP  
Name CASAZZA, KEN  
Address 233 GULF LANE  
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR, SECRETARY  
Name SPANBURGH, ANDREW  
Address 2246 ROBIN RIDGE PLACE  
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR, TREASURER  
Name NEUMANN, PAUL  
Address 1951 TOWER LAKES BLVD  
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR  
Name LUMAYE, GARY  
Address 3419 TOWER OVERLOOK  
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR  
Name JOHN, RENEE  
Address 1918 TOWER LAKES BLVD.  
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR  
Name CUSHMAN, DEAN  
Address 2223 HEON DR.  
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR  
Name WOOD, LEW  
Address 608 CARDINAL LOOP  
City-State-Zip: LAKE WALES FL 33859

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*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: ANDREW T SPANBURGH**

**SECRETARY**

**03/09/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            OPPERMAN, WALTER  
Address        2111 HERON DR.  
City-State-Zip: LAKE WALES FL 33859