

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44099

FILED
Feb 14, 2014
Secretary of State
CC6867232606

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

02/14/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name CLARK, WILLIAM
Address 2210 ROBIN RIDGE
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR, VP
Name LOWIS, RALPH
Address 2019 ORIOLE LANE
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR, TRESASURER
Name BROOKS, BETTE
Address 2232 PARROT PLACE
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR, SECRETARY
Name WHETSTONE, BRENDA
Address 570 CARDINAL LOOP
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name PACK, SHARON
Address 3473 TOWER OVERLOOK DRIVE
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name NOVAK, BOB
Address 2214 PARROT PLACE
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name BROWN, DALE
Address 554 CARDINAL LOOP
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name BARROW, LORNA
Address 2245 EAGLE PLACE
City-State-Zip: LAKE WALES FL 33859

Continues on page 2

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: WILLIAM CLARK

PRESIDENT

02/14/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CORRIVEAU, FRAN
Address 2234 WREN PLACE
City-State-Zip: LAKE WALES FL 33859