#### 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: RAQUEL B. SUAREZ

Electronic Signature of Signing Officer/Director Detail

# Current Mailing Address:

**Current Principal Place of Business:** 

P.O. BOX 292906 DAVIE, FL 33329-2906

DOCUMENT# N48195

5602 S.W. 57 PLACE DAVIE, FL 33314

### FEI Number: 65-0347751

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

LLOYD W. PROCTON, PA 4400 SE 18TH STREET FORT LAUDERDALE, FL 33316 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

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: FIRST IMPRESSION II LAKE OWNERS ASSOCIATION, INC.

## Officer/Director Detail :

Title	DS	Title	DT
Name	MOORE, DEBBIE	Name	SUAREZ, RAQUEL
Address	5602 S.W. 57 PLACE	Address	5701 SW 58 COURT
City-State-Zip:	DAVIE FL 33314	City-State-Zip:	DAVIE FL 33314
Title	D	Title	DVP
Name	CANNEZZARO, MARILYN	Name	BALAN, MIKE
Address	5522 SW 57 PLACE	Address	5710 SW 58 COURT
City-State-Zip:	DAVIE FL 33314	City-State-Zip:	DAVIE FL 33314
Title	DP		
Name	SANCHEZ, RALPH		
Address	5612 S.W. 57 PLACE		
City-State-Zip:	DAVIE FL 33314		

TREASURER

01/04/2015 Date

## FILED Jan 04, 2015 Secretary of State CC0583491794

Certificate of Status Desired: No

Date