

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48195

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

Current Principal Place of Business:

5602 S.W. 57 PLACE
DAVIE, FL 33314

Current Mailing Address:

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

FEI Number: 65-0347751

Certificate of Status Desired: No

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

_____ Date

Officer/Director Detail :

Title DS
Name MOORE, DEBBIE
Address 5602 S.W. 57 PLACE
City-State-Zip: DAVIE FL 33314

Title DT
Name SUAREZ, RAQUEL
Address 5701 SW 58 COURT
City-State-Zip: DAVIE FL 33314

Title D
Name LEONCINI, MICHAEL
Address 5743 S.W. 57 WAY
City-State-Zip: DAVIE FL 33314

Title DVP
Name BALAN, MIKE
Address 5710 SW 58 COURT
City-State-Zip: DAVIE FL 33314

Title DP
Name SANCHEZ, RALPH
Address 5612 S.W. 57 PLACE
City-State-Zip: DAVIE FL 33314

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

TREASURER

01/08/2017

Electronic Signature of Signing Officer/Director Detail

Date