

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N92000000609

**Entity Name:** CORY LAKE ISLES PROPERTY OWNERS ASSOCIATION, INC.

**FILED**  
**Apr 06, 2021**  
**Secretary of State**  
**7022748743CC**

**Current Principal Place of Business:**

18550 N DALE MABRY HWY  
LUTZ, FL 33548

**Current Mailing Address:**

C/O WISE PROPERTY MANAGEMENT, INC.  
18550 N DALE MABRY HWY  
LUTZ, FL 33548 US

**FEI Number:** 59-3237882

**Certificate of Status Desired:** No

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

BUSH ROSS  
C/O WEB MELTON  
1801 N. HIGHLAND AVE  
TAMPA, FL 33602 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:** WEB MELTON

04/06/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name AMIN, BABU JR.  
Address 18550 N DALE MABRY HWY  
City-State-Zip: LUTZ FL 33548

Title PRESIDENT  
Name RAMPHAL, HARESH  
Address 18550 N DALE MABRY HWY  
City-State-Zip: LUTZ FL 33548

Title VP  
Name REDDY, ANOOP  
Address 18550 N DALE MABRY HWY  
City-State-Zip: LUTZ FL 33548

Title TREASURER  
Name SPRINGER, SHERYL  
Address 18550 N DALE MABRY HWY  
City-State-Zip: LUTZ FL 33548

Title DIRECTOR  
Name VASUDEVA, RISHI  
Address 18550 N DALE MABRY HWY  
City-State-Zip: LUTZ FL 33548

*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:** HARESH RAMPHAL

PRESIDENT

04/06/2021

Electronic Signature of Signing Officer/Director Detail

Date