

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003345

**FILED
Mar 30, 2018
Secretary of State
CC8053659670**

Entity Name: LAKE PIERCE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5070 LAKE PIERCE DRIVE
LAKE WALES, FL 33898

Current Mailing Address:

5070 LAKE PIERCE DRIVE
LAKE WALES, FL 33898 US

FEI Number: 59-3211355

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRAZO, JIM
5070 LAKE PIERCE DRIVE
LAKE WALES, FL 33898 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 S
Name FRAZO, JIM
Address 5070 LAKE PIERCE DR
City-State-Zip: LAKE WALES FL 33898

Title TD
Name HAINES, ELAINE
Address 5030 LAKE PIERCE DRIVE
City-State-Zip: LAKE WALES FL 33853

Title D
Name FALKENHOF, JACK
Address 5063 LAKE PIERCE DR
City-State-Zip: LAKE WALES FL 33898

Title VD
Name TERRY, KENNETH
Address 2729 LAKE PIERCE DRIVE
City-State-Zip: LAKE WALES FL 33898

Title PD
Name SHIELDS, SANDY
Address 4985 LAKE PIERCE DRIVE
City-State-Zip: LAKE WALES FL 33898

Title DIRECTOR
Name RAKHMATULLIN, AYDAR
Address 2719 LAKE PIERCE DRIVE
City-State-Zip: LAKE WALES FL 33898

Title DIRECTOR
Name BYRD, LAURA
Address 4959 LAKE PIERCE DRIVE
City-State-Zip: LAKE WALES FL 33898

Title DIRECTOR
Name MORITZ, KENNETH
Address 5070 LAKE PIERCE DRIVE
2743 LAKE PIERCE DRIVE
City-State-Zip: LAKE WALES FL 33898

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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: JIM FRAZO

SECRETARY

03/30/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WARNER, ROBERT
Address 5070 LAKE PIERCE DRIVE
City-State-Zip: LAKE WALES FL 33898