

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

DOCUMENT# N94000001391

**Entity Name:** VILLA CALESA LAKESIDE HOMES OWNERS ASSOCIATION, INC.**FILED**  
**Apr 29, 2021**  
**Secretary of State**  
**1931185444CC****Current Principal Place of Business:**4946 HERTON DR  
JACKSONVILLE, FL 32258**Current Mailing Address:**4946 HERTON DR  
JACKSONVILLE, FL 32258 US**FEI Number: 59-2407325****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BOOKKEEPING AND ACCOUNTING OF FL  
4946 HERTON DR  
JACKSONVILLE, FL 32258 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	TREASURER
Name	KRAUSE, CHARLES
Address	4010 LA VISTA CIRCLE
City-State-Zip:	JACKSONVILLE FL 32217

Title	P
Name	MCCLANAHAN, MARSHA
Address	4008 LA VISTA CIRCLE
City-State-Zip:	JACKSONVILLE FL 32217

Title	V
Name	KALOYEROPOULOS, PAUL
Address	4006 LA VISTA CIRCLE
City-State-Zip:	JACKSONVILLE FL 32217

Title	S
Name	SARAIYA, KIRTI
Address	4028 LA VISTA CIRCLE
City-State-Zip:	JACKSONVILLE FL 32217

*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: MCCLANAHAN , MARSHA****P****04/29/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date