

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003512

FILED
Mar 02, 2020
Secretary of State
9443929586CC

Entity Name: THE COLONY OF THE LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

215 CELEBRATION PLACE
C/O ACCESS MANAGEMENT SUITE 115
CELEBRATION, FL 34747

Current Mailing Address:

215 CELEBRATION PLACE
C/O ACCESS MANAGEMENT SUITE 115
CELEBRATION, FL 34747 US

FEI Number: 59-3286231

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ACCESS MANAGEMENT
215 CELEBRATION PLACE
C/O ACCESS MANAGEMENT SUITE 115
CELEBRATION, FL 34747 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: MICHAEL W LASTER

03/02/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name ANGEL, ISAAC R
Address 215 CELEBRATION PLACE
C/O ACCESS MANAGEMENT SUITE
115
City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR
Name RUBEIS, MIKE
Address 215 CELEBRATION PLACE
C/O ACCESS MANAGEMENT SUITE
115
City-State-Zip: CELEBRATION FL 34747

Title TREASURER
Name MAYNARD, JOHN
Address 215 CELEBRATION PLACE
C/O ACCESS MANAGEMENT SUITE
115
City-State-Zip: CELEBRATION FL 34747

Title PRESIDENT
Name DONLIN, JIM
Address 215 CELEBRATION PLACE
C/O ACCESS MANAGEMENT SUITE
115
City-State-Zip: CELEBRATION FL 34747

Title VP
Name AISA, ARNY
Address 215 CELEBRATION PLACE
C/O ACCESS MANAGEMENT SUITE
115
City-State-Zip: CELEBRATION FL 34747

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 DONLIN

PRESIDENT

03/02/2020

Electronic Signature of Signing Officer/Director Detail

Date