

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005653

Entity Name: FLORIDA LAKE MANAGEMENT SOCIETY, INC.**Current Principal Place of Business:**6701 LAKE KIRKLAND DRIVE
CLERMONT, FL 34714**Current Mailing Address:**6701 LAKE KIRKLAND DRIVE
CLERMONT, FL 34714 US**FEI Number: 52-1754014****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KRISOVITCH, MARYANN
6701 LAKE KIRKLAND DRIVE
CLERMONT, FL 34714 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 EXECUTIVE DIRECTOR
Name KRISOVITCH, MARYANN
Address 6701 LAKE KIRKLAND DRIVE
City-State-Zip: CLERMONT FL 34714

Title PAST PRESIDENT, DIRECTOR
Name EBY, GLORIA
Address 401 PARK AVE S
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR
Name MCGLYNN, SEAN PHD
Address 568 BEVERLY COURT
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name THOMAS, SERGE PHD
Address 10501 FGCU BLVD S
FT. MYERS LIBRARY 464G
City-State-Zip: FORT MYERS FL 33965

Title SECRETARY
Name BURNES, ROBERT
Address 22211 US HWY 19N
BLDG 10
City-State-Zip: CLEARWATER FL 33765

Title VP
Name TRENT, TIFFANY
Address PO BOX 1429
City-State-Zip: PALATKA FL 32178

Title TREASURER
Name SCHMUTZ, DAN
Address 423 S. KELLER RD
300
City-State-Zip: ORLANDO FL 32810

Title PRESIDENT
Name ALI, EESA
Address 8306 LAUREL FAIR CIRCLE
120
City-State-Zip: TAMPA FL 33610

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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: MARYANN KRISOVITCH**EXECUTIVE DIRECTOR****01/30/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GOODWIN, PATRICK
Address 374 MARSH COVE DR
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR
Name DANAHER, JASON PHD
Address 27351 SE 19
City-State-Zip: TAVARES FL 32778

Title DIRECTOR
Name LASSO DE LA VEGA, ERNESTO
Address P.O. BOX 60005
City-State-Zip: FORT MYERS FL 33906

Title DIRECTOR
Name STEPHENS, DANA PHD
Address 100 COLLEGE BLVD
City-State-Zip: NICEVILLE FL 32578

Title DIRECTOR
Name MONTGOMERY, STEPHEN
Address 6900 SW 21ST COURT
BLDG 9
City-State-Zip: DAVIE FL 33317

Title DIRECTOR
Name OLSON, TODD
Address 2437 CANNOLOT BLVD
City-State-Zip: PORT CHARLOTTE FL 33948