

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000000742

**FILED**  
**Apr 30, 2024**  
**Secretary of State**  
**1332525358CC**

**Entity Name:** THE MANSIONS AT FOREST LAKES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ALLIED PROPERTY GROUP  
12350 SW 132 CT SUITE 114  
MIAMI, FL 33186

**Current Mailing Address:**

C/O ALLIED PROPERTY GROUP  
12350 SW 132 CT SUITE 114  
MIAMI, FL 33186 US

**FEI Number: 65-0741512**

**Certificate of Status Desired: No**

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

SIEGFRIED LAW FIRM  
201 ALHAMBRA CIRCLE, #1102  
CORAL GABLES, FL 33134 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: JORGE GOMEZ**

**04/30/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GOMEZ, JORGE  
Address        C/O ALLIED PROPERTY GROUP  
                  12350 SW 132 CT SUITE 114  
City-State-Zip: MIAMI FL 33186

Title            VP  
Name            MCCLURE, KEITH  
Address        C/O ALLIED PROPERTY GROUP  
                  12350 SW 132 CT SUITE 114  
City-State-Zip: MIAMI FL 33186

Title            TD  
Name            FIGUEROA, ROLANDO  
Address        C/O ALLIED PROPERTY GROUP  
                  12350 SW 132 CT SUITE 114  
City-State-Zip: MIAMI FL 33186

Title            SECRETARY  
Name            LITTMAN, ALBERTA  
Address        C/O ALLIED PROPERTY GROUP  
                  12350 SW 132 CT SUITE 114  
City-State-Zip: MIAMI FL 33186

Title            D  
Name            MENENDEZ, CARLOS  
Address        C/O ALLIED PROPERTY GROUP  
                  12350 SW 132 CT SUITE 114  
City-State-Zip: MIAMI FL 33186

*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: JORGE GOMEZ**

**PRESIDENT**

**04/30/2024**

Electronic Signature of Signing Officer/Director Detail

Date