### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N96000001431

# Entity Name: EASTLAKE OAKS HOMEOWNERS ASSOCIATION, INC.

# **Current Principal Place of Business:**

720 BROOKER CREEK BLVD. SUITE 206 OLDSMAR, FL 34677

### **Current Mailing Address:**

720 BROOKER CREEK BLVD. SUITE 206 OLDSMAR, FL 34677

#### FEI Number: 59-3375272

## Name and Address of Current Registered Agent:

SCANNAVINO, INC. 720 BROOKER CREEK BLVD. SUITE 206 OLDSMAR, FL 34677 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

#### **Officer/Director Detail :**

	Title	STD	Title	PD
	Name	ROBINSON, CHAD	Name	SARACKI, DANIEL
	Address	720 BROOKER CREEK BLVD. #206	Address	720 BROOKER CREEK BLVD. #206
	City-State-Zip:	OLDSMAR FL 34677	City-State-Zip:	OLDSMAR FL 34677
	Title	D	Title	D
				-
	Name	YAGNIK, NICK	Name	LAZIER, DARLENE
	Address	720 BROOKER CREEK BLVD. #206	Address	720 BROOKER CREEK BLVD. #206
	City-State-Zip:	OLDSMAR FL 34677	City-State-Zip:	OLDSMAR FL 34677
	Title	D		
	Name	ROPER, SCOTT		
	Address	720 BROOKER CREEK BLVD. SUITE 206		

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

### SIGNATURE: DANIEL SARACKI

City-State-Zip: OLDSMAR FL 34677

Electronic Signature of Signing Officer/Director Detail

## FILED Feb 14, 2017 Secretary of State CC8427903004

Certificate of Status Desired: No

Date