FEI Number: 30-0131649			Certificate of Status Desired: Yes	
Name and A	ddress of Current Registered Agent:			
BISHOP, TREV 9495 80TH ST VERO BEACH,				
The above named	entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	orida.
SIGNATURE: TREVA-ANNE E. BISHOP				02/13/2019
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title	OFFICER	Title	PRESIDENT	
Name	KRANENBURG, PAMELA S	Name	CIAMBRIELLO, MARY LOU	
Address	8446 93RD AVE	Address	8256 105TH CT	
City-State-Zip:	VERO BEACH FL 32967	City-State-Zip:	VERO BEACH FL 32967	
Title	TREASURER	Title	VP	
Name	SRECKOVICH, DONNA M	Name	BISHOP, TREVA	
Address	8616 101 AVENUE	Address	9495 80TH ST	
City-State-Zip:	VERO BCH FL 32967	City-State-Zip:	VERO BEACH FL 32967	
Title	SECRETARY	Title	OFFICER	
Name	NEGREIRA, CARMEN	Name	SRECKOVICH, MICHAEL	
Address	7746 100TH AVE	Address	8616 101 AVENUE	
City-State-Zip:	VERO BEACH FL 32967	City-State-Zip:	VERO BEACH FL 32967	
Title	OFFICER	Title	OFFICER	
Name	SMITH, LAWRENCE	Name	MCADAMS, MARYELLEN	
Address	7856 99TH COURT	Address	8285 102 COURT	
City-State-Zip:	VERO BEACH FL 32967	City-State-Zip:	VERO BEACH FL 32967	

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005333

Entity Name: VERO LAKE ESTATES PROPERTY OWNERS, INC.

Current Principal Place of Business:

8256 105TH CT VERO BEACH, FL 32967

Current Mailing Address:

P.O. BOX 780869 SEBASTIAN, FL 32978 US

FEI Number: 30-0131649

Continues on page 2

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: MARY LOU CIAMBRIELLO

PRESIDENT

02/13/2019

Electronic Signature of Signing Officer/Director Detail

FILED Feb 13, 2019 **Secretary of State** 7390987823CC

Certificate of Status Desired: Yes

Officer/Director Detail Continued :

Title	OFFICER	Title	OFFICER
Name	NEGREIRA, GUADALUPE	Name	FLEMING, MARGARET
Address	7816 103RD AVENUE	Address	8655 99TH AVENUE
City-State-Zip:	VERO BEACH FL 32967	City-State-Zip:	VERO BEACH FL 32967