

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000275

FILED
Mar 08, 2013
Secretary of State
CC8694796652

Entity Name: LAKE CRESCENT PINES EAST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10718 ARIA COURT
CLERMONT, FL 34711

Current Mailing Address:

P.O. BOX 121628
CLERMONT, FL 34712-1628 US

FEI Number: 59-3426910

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ANITA GERACI-CARVER ESQUIRE
1560 BLOXAM AVE
CLERMONT, FL 34711 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: ANITA GERACI-CARVER

03/08/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name SORENSEN, WALLY
Address 10718 ARIA COURT
City-State-Zip: CLERMONT FL 34711

Title S
Name STEVENS, TRISH
Address 1052 OSPREY COVE CIR
City-State-Zip: GROVELAND FL 34736

Title D
Name RODRIQUEZ, JULIO
Address 10608 CRESCENDO LOOP
City-State-Zip: CLERMONT FL 34711

Title DIRECTOR AT LARGE
Name NEEL, ROB
Address 10711 CRESCENDO LOOP
City-State-Zip: CLERMONT FL 34711

Title VPD
Name RODRIGUEZ, JULIO
Address 10608 CRESCENDO LOOP
City-State-Zip: CLERMONT FL 34711

Title T
Name MYERS, STACY L
Address 10750 ARIA COURT
City-State-Zip: CLERMONT FL 34711

Title D
Name SEPE, VERNA
Address 10605 CRESCENDO LOOP
City-State-Zip: CLERMONT FL 34711

Title DIRECTOR, AT LARGE
Name CARLILE, DANNY
Address 10706 CRESCENDO LOOP
City-State-Zip: CLERMONT FL 34711

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: WALLY SORENSEN

PRESIDENT

03/08/2013

Electronic Signature of Signing Officer/Director Detail

Date