

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003186

Entity Name: FOUR LAKES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

941 LAQUINTA BLVD
WINTER HAVEN, FL 33881

Current Mailing Address:

990 LAQUINTA BLVD
WINTER HAVEN, FL 33881

FEI Number: 59-3520562

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SCHROEDER, JOHN E
1321 LAS BRISAS LN
WINTER HAVEN, FL 33881 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: JOHN E. SCHROEDER

04/07/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name AKERS, JAMES
Address 825 SUNNING DALE CT
City-State-Zip: WINTER HAVEN FL 33881

Title SECRETARY
Name SCHROEDER, JOHN
Address 1321 LAS BRISAS LN
City-State-Zip: WINTER HAVEN FL 33881

Title P
Name MIESMER, MARK
Address 945 LAQUINTA BLVD
City-State-Zip: WINTER HAVEN FL 33881

Title VP
Name BELGIORNO, MARIO
Address 1529 ABERDEEN
City-State-Zip: WINTER HAVEN FL 33881

Title D
Name YOUNGER, DEBBIE
Address 1644 GLEN ABBEY LN
City-State-Zip: WINTER HAVEN FL 33881

Title D
Name MIESMER, KIRK
Address 2423 CROOKED STICK
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR
Name POLNAK, MARK
Address 1126 LA COSTA LN
City-State-Zip: WINTER HAVEN FL 33881

Title TREASURER
Name WINSOR, BETH
Address 1706 GLEN ABBY LN
City-State-Zip: WINTER HAVEN FL 33881

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: JOHN E. SCHROEDER

SECRETARY

04/07/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MURPHY, EDWARD
Address 1281 LAS BRISAS LN
City-State-Zip: WINTER HAVEN FL 33881