## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005382

Entity Name: LONG LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 08, 2024
Secretary of State
8510029959CC

## **Current Principal Place of Business:**

MIAMI MANAGEMENT, INC 1145 SAWGRASS CORP PKWY SUNRISE, FL 33323

## **Current Mailing Address:**

MIAMI MANAGEMENT, INC 1145 SAWGRASS CORP PKWY SUNRISE, FL 33323

FEI Number: 65-0866804 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A. 2699 STIRLING ROAD C207

HOLLYWOOOD-FT. LAUDERDALE, FL 33312 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 Date

Officer/Director Detail:

Title TREASURER, DIRECTOR Title PRESIDENT, DIRECTOR

Name STICKLEY, ANA Name BAILEY, BRIAN

Address 1145 SAWGRASS CORP PARKWAY Address 1145 SAWGRASS CORP PARKWAY

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title SECRETARY, DIRECTOR Title VP, DIRECTOR

Name FRANKOSKI, ED Name WIEGMANN, BRIAN

Address 1145 SAWGRASS CORP PARKWAY Address 1145 SAWGRASS CORP PARKWAY

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title DIRECTOR

Name MATHEW, TONSON

Address 1145 SAWGRASS CORP PARKWAY

City-State-Zip: SUNRISE FL 33323

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: BRIAN BAILEY PRESIDENT 01/08/2024