

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000006001

**FILED**  
**Jan 12, 2018**  
**Secretary of State**  
**CC0011939849**

**Entity Name:** THE LAKES OF LADY LAKE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

579 DOWLING CIRCLE  
LADY LAKE, FL 32159

**Current Mailing Address:**

579 DOWLING CIRCLE  
LADY LAKE, FL 32159 US

**FEI Number:** 59-3551293

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JACOBS, JOY  
579 DOWLING CIRCLE  
LADY LAKE, FL 32159 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:** JOY JACOBS

01/12/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            RAUS, RICHARD  
Address        579 DOWLING CIRCLE  
City-State-Zip: LADY LAKE FL 32159

Title            TREASURER  
Name            JACOBS, JOY  
Address        579 DOWLING CIRCLE  
City-State-Zip: LADY LAKE FL 32159

Title            GENERAL BOARD MEMBER  
Name            HALL, HERBERT  
Address        579 DOWLING CIRCLE  
City-State-Zip: LADY LAKE FL 32159

Title            GENERAL BOARD MEMBER  
Name            MATHIAS, PHILIP  
Address        579 DOWLING CIRCLE  
City-State-Zip: LADY LAKE FL 32159

Title            SECRETARY  
Name            NEWTON, JANAY  
Address        579 DOWLING CIRCLE  
City-State-Zip: LADY LAKE FL 32159

*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:** JOY A JACOBS

**TREASURER**

01/12/2018

Electronic Signature of Signing Officer/Director Detail

Date