

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006354

Entity Name: LAKE FANTASIA HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8350 FANTASIA PARK WAY
RIVERVIEW, FL 33578**Current Mailing Address:**C/O MERIT MANAGEMENT
3433 LITHIA PINECREST RD. SUITE 301
VALRICO, FL 33596 US**FEI Number: 59-3545911****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MERIT, INC.
1460 OAKFIELD DRIVE
BRANDON, FL 33511 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:** RICHARD PITROWSKI

01/30/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	SEAGER BROWN, SANDY
Address	C/O MERIT MANAGEMENT 3433 LITHIA PINECREST RD. SUITE 301
City-State-Zip:	VALRICO FL 33596

Title	TREASURER
Name	DOWD, JOHN JR.
Address	C/O MERIT MANAGEMENT 3433 LITHIA PINECREST RD. SUITE 301
City-State-Zip:	VALRICO FL 33596

Title	PRESIDENT
Name	DIMICK, BELLE
Address	C/O MERIT MANAGEMENT 3433 LITHIA PINECREST RD. SUITE 301
City-State-Zip:	VALRICO FL 33596

Title	SECRETARY
Name	URBAN, JEFF
Address	C/O MERIT MANAGEMENT 3433 LITHIA PINECREST RD. SUITE 301
City-State-Zip:	VALRICO FL 33596

Title	DIRECTOR
Name	MARTINEZ, EUGENE
Address	C/O MERIT MANAGEMENT 3433 LITHIA PINECREST RD. SUITE 301
City-State-Zip:	VALRICO FL 33596

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: BELLE DIMICK**PRESIDENT**

01/30/2020

Electronic Signature of Signing Officer/Director Detail

Date