

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014007

Entity Name: LAKE CENTER OF H.O.P.E., P.A.

Current Principal Place of Business:

33057 PROFESSIONAL DR
SUITE 102
LEESBURG, FL 34788

Current Mailing Address:

33057 PROFESSIONAL DR
SUITE 102
LEESBURG, FL 34788

FEI Number: 59-3500597

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNGSON, LOURDES N
33057 PROFESSIONAL DR
SUITE 102
LEESBURG, FL 34788 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	P	Title	ST
Name	UNGSON, NICK MMD	Name	UNGSON, LOURDES N
Address	40816 FLETCHER RD	Address	40816 FLETCHER RD
City-State-Zip:	UMATILLA FL 32784	City-State-Zip:	UMATILLA FL 32784

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOURDES N UNGSON

ST

05/31/2013

Electronic Signature of Signing Officer/Director Detail

Date