

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006151

FILED
Feb 19, 2010
Secretary of State

Entity Name: HOMEOWNERS' SUB-ASSOCIATION OF EAST LAKE VILLAGE, INC.

Current Principal Place of Business:

430 NW LAKE WHITNEY PL
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

430 NW LAKE WHITNEY PL
PORT ST LUCIE, FL 34952

New Mailing Address:

FEI Number: 20-1975663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPLAN, LOU
1850 SW FOUNTAINVIEW BLVD
207
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: KESSLER, JAMES
Address: 1936 SE GRAND DR
City-St-Zip: PORT ST LUCIE, FL 34952

Title: VP
Name: HEARDEN, ROBERT
Address: PO BOX 7430
City-St-Zip: PORT ST LUCIE, FL 34995

Title: T
Name: WENDLAND, KAREN
Address: 2140 SE EATONVILLE DR
City-St-Zip: PORT ST LUCIE, FL 34952

Title: S
Name: YONTA, CHIRSTY
Address: 2142 SE GRAND DR
City-St-Zip: PORT ST LUCIE, FL 34952

Title: D
Name: BRIGGS, MARCELLA
Address: 2573 SE PINELAND DR
City-St-Zip: PORT ST LUCIE, FL 34952

Title: D
Name: LADISA, CHIRSTOPHER
Address: 2384 SE QUAIN DR
City-St-Zip: PORT ST LUCIE, FL 34952

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: JAMES KESSLER

P

02/19/2010

Electronic Signature of Signing Officer or Director

Date