Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000213650 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 : (850)222-1092 Phone : (850)878-5368 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION LYMAN AVENUE VILLAS 1 HOMEOWNERS' ASSOCIATION, INC.

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help 40 9/11/2014

https://efile.sunbiz.org/scripts/efilcovr.exe

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: LYMAN AVENUE VILLAS 1 HOMEOWNERS' ASSOCIATION, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUBJECT)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00 Filing Fee □ \$78.75
Filing Fee & Certificate of

Status

\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

Renneth L. Schlitt

Name (Printed or typed)

250 E. Colonial Dr. Suite 300

Addres

Orlando, Florida 32801

City, Stale & Zip

407-425-2907

Daytime Telephone number

RAnderson@dwhomes.com

E-mail address: (to be used for fature annual report notification)

NOTE: Please provide the original and one copy of the articles.

FILED 2014 SEP 11 PH 2:44

ARTICLES OF INCORPORATION SECRETARY OF STATE In compliance with Chapter 617, F.S., (Not for Profit) LAHASSEE, ELORID. ARTICLE I NAME LYMAN AVENUE VILLAS 1 HOMEOWNERS' ASSOCIATION, INC. The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address: Mailing address, if different is: 225 S. Westmonte Drive, Suite 3300 Altamonte Springs, Florida 32714 ARTICLE III PURPOSE The purpose for which the corporation is organized is: (1) To operate as a not-for-profit residential homeowners' association in which voting membership is made up of Lot Owners as contemplated by Chapter 720, Florida Statutes, as the same may be amended from time to time; (2) To be and constitute the Association described in the Declaration of Covenants Conditions and Restrictions for Lyman Avenue Villas 1 recorded in the Public Records of Orange County, Florida, as the same may be amended from time to time (the "Declaration"), to perform all obligations and duties of the Association, and to exercise all rights and powers of the Association, as specified therein, in the Bylaws of the Corporation and as provided by law; and (3) To protect the interests of the owners of real property subject to the Declaration. MANNER OF ELECTION _ The manner in which the directors are elected and appointed; is as set forth <u>ARTICLE IV</u> in the Bylaws. INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Kevin Kramer, President Name and Title: 225 S. Westmonte Drive, Suite 3300 Address Altemonte Springs, Florida 32714 Brent Bartholomew, VP & Treasurer Name and Title: Name and Title: 225 S. Westmonte Drive, Sulte 3300 Address Altamonte Springs, Florida 32714 Rick Anderson, Secretary Name and Title Name and Title: 1111 North Post Oak Road Address Houston, Texas 77055

Name and Title:		Name and Title:			
Address		Address:			
Name and Title;					
	REGISTERED AGENT Ida street eddress (P.O. Box NOT accepts Kenneth L. Schlitt	able) of the registe	rod agent is:		
Address:	250 E. Colonial Drive, Suite Orlando, Florida 32801	300			
	INCORPORATOR ress of the Incorporator is: Kevin Kramer 225 S. Westmonte Orive, Suite Altamonte Springs, Florida 3				
certificate, 1 am fa	ed as registered agent to accept service of utiliar with and accept the appointment as Registed Signature of Registered A	regimered agent a	and agree to act in this ca	Date	
	neat and affirm that the facts stated hereby of State constitutes a third degree felany as Required Signature of Incomp	s provided for in s	.817.155, F.S.	nation subsuites	