

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 09, 2016
Secretary of State
CC9865025860

Entity Name: LAKELAND HARBOUR APARTMENTS INC.

Current Principal Place of Business:

1600 WEST LAKE PARKER DRIVE
LAKELAND, FL 33805

Current Mailing Address:

1600 W LAKE PARKER DR
#C6
LAKELAND, FL 33805 US

FEI Number: 59-1196609

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALDREN, RAY A
1600 WEST LAKE PARKER DRIVE,C-6
LAKELAND, FL 33805 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
Name HIRN, LORI
Address 1600 W LAKE PARKER DR A21
City-State-Zip: LAKELAND FL 33805

Title S
Name SMITH, ROBERT
Address 1600 W LAKE PARKER DR B9
City-State-Zip: LAKELAND FL 33805

Title T
Name WALDREN, RAY A
Address 1600 W LAKE PARKER DRIVE C6
City-State-Zip: LAKELAND FL 33805

Title DIRECTOR
Name DILLON, GWENDOLYN
Address 1600 W LAKE PARKER DR
B-1
City-State-Zip: LAKELAND FL 33805

Title VP
Name WEAVER, CHARLES
Address 1600 WEST LAKE PARKER DRIVE
A-22
City-State-Zip: LAKELAND FL 33805

Title DIRECTOR
Name CHRISTOPHER, EDWARD
Address 1600 W LAKE PARKER DR
B-25
City-State-Zip: LAKELAND FL 33805

Title DIRECTOR
Name PARRISH, LESTER
Address 1600 W LAKE PARKER DR
B-8
City-State-Zip: LAKELAND FL 33805

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: RAY A. WALDREN

TREASURER

03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date