SARASOTA, F				
Current Mai	ling Address:			
PO BOX 250 SARASOTA	41 FL 34277 US			
FEI Number: 59-1404474			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
ERB, SHERRY 2203 BROOKH SARASOTA, FL				
The above name	l entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	orida.
	l entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	orida. 02/15/2022
	, , , , , , , , , , , , , , , , , , , ,	tered office or regis	tered agent, or both, in the State of Flo	
	Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flo	02/15/2022
SIGNATURE	Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flo	02/15/2022
SIGNATURE Officer/Dire	SHERRY ERB     Electronic Signature of Registered Agent ctor Detail :			02/15/2022
SIGNATURE Officer/Dire	SHERRY ERB Electronic Signature of Registered Agent Ctor Detail : P	Title	TD	02/15/2022
SIGNATURE Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P ERB, SHERRY	Title Name	TD STEGER, MIMI 3271 PINE VALLEY DRIVE	02/15/2022
SIGNATURE Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P ERB, SHERRY 2203 BROOKHAVEN DRIVE	Title Name Address	TD STEGER, MIMI 3271 PINE VALLEY DRIVE	02/15/2022
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : P ERB, SHERRY 2203 BROOKHAVEN DRIVE SARASOTA FL 34239	Title Name Address City-State-Zip:	TD STEGER, MIMI 3271 PINE VALLEY DRIVE SARASOTA FL 34239	02/15/2022
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : P ERB, SHERRY 2203 BROOKHAVEN DRIVE SARASOTA FL 34239 SD	Title Name Address City-State-Zip: Title	TD STEGER, MIMI 3271 PINE VALLEY DRIVE SARASOTA FL 34239 VP	02/15/2022

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.

TD

## **DOCUMENT# 719856**

Entity Name: FOREST LAKES COUNTRY CLUB ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:** 

2203 BROOKHAVEN DRIVE

FILED Feb 15, 2022 **Secretary of State** 9552804014CC

Electronic Signature of Signing Officer/Director Detail