| Cu | urrent Principal Place of Business: |
|----|---|
| 76 | D HMI 60 FLORIDA CENTRAL PKWY SUITE #200 NGWOOD, FL 32750 |
| Cu | urrent Mailing Address: |
| • | O HMI 60 FLORIDA CENTRAL PKWY SUITE #200 |

FEI Number: 59-1515897

LONGWOOD, FL 32750 US

DOCUMENT# 723514

Name and Address of Current Registered Agent:

HMI C/O HMI 760 FLORIDA CENTRAL PKWY SUITE #200 LONGWOOD, FL 32750 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.

| | Electronic Signature of Registered Agent | | |
|-----------------|---|-----------------|---|
| | Electronic orginature of Registered Agent | | Date |
| Officer/Direc | ctor Detail : | | |
| Title | SECRETARY | Title | TREASURER |
| Name | STICKLER, NANCY E | Name | WENDRZYK, VINCENT |
| Address | C/O HMI 760 FLORIDA CENTRAL PKWY SUITE #200 | Address | C/O HMI 760 FLORIDA CENTRAL PKWY SUITE #200 |
| City-State-Zip: | LONGWOOD FL 32750 | City-State-Zip: | LONGWOOD FL 32750 |
| Title | VP | Title | PRESIDENT |
| Name | BRAUN, JUSTIN | Name | MORRIS, BRADLEY |
| Address | C/O HMI 760 FLORIDA CENTRAL PKWY SUITE #200 | Address | C/O HMI 760 FLORIDA CENTRAL PKWY SUITE #200 |
| City-State-Zip: | LONGWOOD FL 32750 | City-State-Zip: | LONGWOOD FL 32750 |
| Title | DIRECTOR | | |
| Name | RENTFLOW, DAVE | | |
| Address | C/O HMI 760 FLORIDA CENTRAL PKWY SUITE #200 | | |
| City-State-Zip: | LONGWOOD FL 32750 | | |

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.

PRESIDENT

SIGNATURE: BRADLEY MORRIS

Electronic Signature of Signing Officer/Director Detail

FILED Apr 03, 2023 Secretary of State 8231804005CC

Certificate of Status Desired: No

Date

04/03/2023

Entity Name: CHATEAUX DU LAC CONDOMINIUM ASSOCIATION, INC.