## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 724271** 

Entity Name: LUDLUM LAKE ASSOCIATION INC.

**FILED** Feb 01, 2023 **Secretary of State** 2368685942CC

# **Current Principal Place of Business:**

**5190 NW 167TH STREET** 

202

MIAMI LAKES, FL 33014

# **Current Mailing Address:**

5190 NW 167TH STREET **SUITE 202** MIAMI LAKES, FL 33014 US

FEI Number: 59-1418726 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

UNIVERSAL PROPERTY MANAGEMENT UNIVERSAL PROPERTY MANAGEMENT 5190 NW 167TH STREET SUITE 202 MIAMI LAKES, FL 33014 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: MARTA BASCOY 02/01/2023

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

City-State-Zip:

Title **SECRETARY** Title **PRESIDENT** Name DE LEON, BELINDA Name LEAL, ALEXIS

**5190 NW 167TH STREET 5190 NW 167TH STREET** Address Address SUITE 202

SUITE 202

City-State-Zip: MIAMI LAKES FL 33014 City-State-Zip: MIAMI LAKES FL 33014

Title TREASURER, VP Title **DIRECTOR** 

Name FRANKLIN, ANDREA Name BASCOY, MARTA

Address 5190 NW 167TH ST Address **5190 NW 167TH STREET** 

SUITE 202 202

MIAMI LAKES FL 33014 City-State-Zip: MIAMI LAKES FL 33014

Title DIRECTOR Title DIRECTOR

MARZO, MARIA PEREZ, CESAR Name Name

**5190 NW 167TH STREET 5190 NW 167TH STREET** Address Address

SUITE 202 SUITE 202

City-State-Zip: MIAMI LAKES FL 33014 City-State-Zip: MIAMI LAKES FL 33014

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.