

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724974

Entity Name: LAUREL OAK VILLAGE UNIT FIVE PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

150 S. MAIN ST.
SUITE 1
LABELLE, FL 33935

Current Mailing Address:

P.O. BOX 1526
LABELLE, FL 33975

FEI Number: 65-0029645

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HIGGINBOTHAM, ANDREW J
150 S. MAIN STREET
#1
LABELLE, FL 33975 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 HOLLINGSWORTH, JOHN
Address 4504 SPRINGVIEW CIR
City-State-Zip: LABELLE FL 33935

Title VP
Name OWENS, LEON
Address 4548 SPRINGVIEW CIR
City-State-Zip: LABELLE FL 33935

Title S
Name BRODACK, KENNETH
Address 4502 ECHO CT
City-State-Zip: LABELLE FL 33935

Title T
Name CUMMINGS, MICHAEL
Address 4510 ECHO CT
City-State-Zip: LABELLE FL 33935

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: MICHAEL CUMMINGS

TREASURER

02/19/2013

Electronic Signature of Signing Officer/Director Detail

Date