2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2023
Secretary of State
6638682063CC

DOCUMENT# 745339

Entity Name: THE RAVINES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

C/O LIFESTYLES PROPERTY SERVICES
1011 3RD ST N
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

C/O LIFESTYLES PROPERTY SERVICES
1011 3RD ST N
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-1972679

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIFESTYLES PROPERTY SERVICES, LLC
1011 3RD ST N
JACKSONVILLE BEACH, FL 32250 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: KRIS PEDERSEN 03/14/2023

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR	Title	VP, DIRECTOR
Name	BOLON, DOUGLAS	Name	WINSOR, CHRISTOPHER
Address	C/O LIFESTYLES PROPERTY SERVICES 1011 3RD ST N	Address	C/O LIFESTYLES PROPERTY SERVICES 1011 3RD ST N
City-State-Zip:	JACKSONVILLE BEACH FL 32250	City-State-Zip:	JACKSONVILLE BEACH FL 32250
Title	DIRECTOR, TREASURER	Title	DIRECTOR, SECRETARY
Name	SAWYER, CARLA	Name	BRENT, MARGARET
Address	C/O LIFESTYLES PROPERTY SERVICES 1011 3RD ST N	Address	C/O LIFESTYLES PROPERTY SERVICES 1011 3RD ST N
City-State-Zip:	JACKSONVILLE BEACH FL 32250	City-State-Zip:	JACKSONVILLE BEACH FL 32250
Title	DIRECTOR	Title	DIRECTOR
Name	GRAHAM, BRIAN	Name	GETMAN, JODI
Address	C/O LIFESTYLES PROPERTY SERVICES 1011 3RD ST N	Address	C/O LIFESTYLES PROPERTY SERVICES 1011 3RD ST N
City-State-Zip:	JACKSONVILLE BEACH FL 32250	City-State-Zip:	JACKSONVILLE BEACH FL 32250
Title	DIRECTOR	Title	DIRECTOR
Name	DUKES, DERON	Name	DEBUSK, KENNETH
Address	C/O LIFESTYLES PROPERTY SERVICES 1011 3RD ST N	Address	C/O LIFESTYLES PROPERTY SERVICES 1011 3RD ST N
City-State-Zip:	JACKSONVILLE BEACH FL 32250	City-State-Zip:	JACKSONVILLE BEACH FL 32250

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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: DOUGLAS BOLON PRESIDENT 03/14/2023

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WRIGHT, CAROL
Address	C/O LIFESTYLES PROPERTY SERVICES 1011 3RD ST N
City-State-Zip:	JACKSONVILLE BEACH FL 32250