

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762644

Entity Name: PATIO HOMES AT LYME BAY HOMEOWNERS' ASSOCIATION, INC.**FILED**
Mar 11, 2024
Secretary of State
3864123347CC**Current Principal Place of Business:**429 HAWTHORNE CRT.
INDIAN HARBOUR BEACH, FL 32937**Current Mailing Address:**907 E. STRAWBRIDGE AVE, SUITE 103
MELBOURNE, FL 32901 US**FEI Number: 59-2265411****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**VESTA PROPERTY SERVICES
907 E. STRAWBRIDGE AVE, SUITE 103
MELBOURNE, FL 32901 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:** SARAH MILES**03/11/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	COURTEAU, KIMBERLY
Address	907 E. STRAWBRIDGE AVE, SUITE 103
City-State-Zip:	MELBOURNE FL 32901

Title	VD
Name	STRICKLIN, DENNIS
Address	907 E. STRAWBRIDGE AVE, SUITE 103
City-State-Zip:	MELBOURNE FL 32901

Title	TREASURER
Name	STEELE, TONI
Address	907 E. STRAWBRIDGE AVE, SUITE 103
City-State-Zip:	MELBOURNE FL 32901

Title	SECRETARY
Name	JUHRS, JUDITH
Address	907 E. STRAWBRIDGE AVE, SUITE 103
City-State-Zip:	MELBOURNE FL 32901

Title	MAINTENANCE DIRECTOR
Name	PTAK, JOSEPH
Address	907 E. STRAWBRIDGE AVE, SUITE 103
City-State-Zip:	MELBOURNE FL 32901

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: KIMBERLY COURTEAU**PRESIDENT****03/11/2024**

Electronic Signature of Signing Officer/Director Detail

Date