

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002577

Entity Name: MADISON LAKES OF DAVIE HOMEOWNERS ASSOCIATION, INC.**FILED**
Jan 11, 2018
Secretary of State
CC1167233047**Current Principal Place of Business:**C/O PHOENIX MAMAGEMENT
4800 N. STATE RD 7 SUITE 105
LAUDERDALE LAKES, FL 33319**Current Mailing Address:**C/O PHOENIX MAMAGEMENT
4800 N. STATE RD 7 SUITE 105
LAUDERDALE LAKES, FL 33319**FEI Number: 65-1006238****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CHERYL J. LEVIN, P.A.
COUNTYARD BUSINESS CENTER
4694 NW 103RD AVENUE
SUNRISE, FL 33351-7970 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	PD
Name	SANTORSOLA, LINDA
Address	5095 MADISON LAKES CIR EAST
City-State-Zip:	DAVIE FL 33328

Title	D
Name	COULTON, MARK
Address	8150 MADISON LAKES CIRCLE N.
City-State-Zip:	DAVIE FL 33328

Title	VSD
Name	CRISTEA, MIORIKA
Address	8125 S MADISON LAKES CIRCLE
City-State-Zip:	DAVIE FL 33328

Title	DIRECTOR
Name	ECHEVARRIA, MARLEN RAY
Address	5190 MADISON LAKES CIRCLE
City-State-Zip:	DAVIE FL 33328

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: LINDA SANTORSOLA**PRESIDENT****01/11/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date