2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003342

Entity Name: LAKE VICTORIA HOMEOWNERS' ASSOCIATION, INC.

FILED
Mar 25, 2025
Secretary of State
8600191160CC

Current Principal Place of Business:

650 VICTORIA SQUARE LANE LAKELAND. FL 33813

Current Mailing Address:

650 VICTORIA SQUARE LANE LAKELAND, FL 33813 US

FEI Number: 65-0739367 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAY-OVERSTREET, ALICE 5759 LAKE VICTORIA DR. LAKELAND, FL 33813 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: ALICE RAY-OVERSTREET 03/25/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	DIRECTOR, TREASURER	Title	SECRETARY
TILLO	DIRECTOR, TREAGORER	11110	OLOIL IT III

NameCHAPMAN, REGGIENameRAY-OVERSTREET, ALICEAddress5846 LAKE VICTORIA COVEAddress5759 LAKE VICTORIA DRIVE

City-State-Zip: LAKELAND FL 33813 City-State-Zip: LAKELAND FL 33813

TitleDIRECTOR, PRESIDENTTitleDIRECTOR, VPNameBORNMANN, ANDREWNameSUMAN, ALLEN

Address 5902 LAKE VICTORIA DRIVE Address 5780 LAKE VICTORIA DRIVE

City-State-Zip: LAKELAND FL 33813 City-State-Zip: LAKELAND FL 33813

Title DIRECTOR Title DIRECTOR

Name SADLER, STEVE Name ROGERS, ROY

Address 5927 LAKE VICTORIA DRIVE Address 5915 LAKE VICTORIA DRIVE

City-State-Zip: LAKELAND FL 33813 City-State-Zip: LAKELAND FL 33813

Title DIRECTOR Title DIRECTOR

Name STITZEL, ART Name PIAZZA, RICHARD

Address 5816 LAKE VICTORIA COVE Address 5792 LAKE VICTORIA DRIVE

City-State-Zip: LAKELAND FL 33813 City-State-Zip: LAKELAND FL 33813

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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: ALICE RAY-OVERSTREET

SECRETARY

03/25/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name CARL, LEWIS

Address 615 VICTORIA SQUARE LANE

City-State-Zip: LAKELAND FL 33813