2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007012

Entity Name: EMILY'S WALK HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 23, 2020
Secretary of State
9418219251CC

Current Principal Place of Business:

586 MARSH LANDING PARKWAY C/O LIFESTYLES PROPERTY SERVICES JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

586 MARSH LANDING PARKWAY C/O LIFESTYLES PROPERTY SERVICES JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-3649058 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIFESTYLES PROPERTY SERVICES, LLC 586 MARSH LANDING PARKWAY C/O LIFESTYLES PROPERTY SERVICES 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: DANIEL LUCKETT 04/23/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title D

Name JOYCE, PATRICK Name ODOM, TEARRA

Address 586 MARSH LANDING PARKWAY Address 586 MARSH LANDING PARKWAY

C/O LIFESTYLES PROPERTY C/O LIFESTYLES PROPERTY

SERVICES SERVICES

City-State-Zip: JACKSONVILLE BEACH FL 32250 City-State-Zip: JACKSONVILLE BEACH FL 32250

Title SD Title D/VP

Name IULIANO, KRISTY Name JEFFERSON, GEARY

Address 586 MARSH LANDING PARKWAY Address 586 MARSH LANDING PARKWAY

C/O LIFESTYLES PROPERTY C/O LIFESTYLES PROPERTY

SERVICES SERVICES

City-State-Zip: JACKSONVILLE BEACH FL 32250 City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR Title D

Name DICKSON, JAIME Name JOLLY, REGINALD

Address 586 MARSH LANDING PARKWAY Address 586 MARSH LANDING PARKWAY

C/O LIFESTYLES PROPERTY C/O LIFESTYLES PROPERTY

SERVICES SERVICES

City-State-Zip: JACKSONVILLE BEACH FL 32250 City-State-Zip: JACKSONVILLE BEACH FL 32250

SIGNATURE: PATRICK JOYCE PRESIDENT 04/23/2020

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.