

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000005556

**Entity Name:** JAMESTOWN SQUARE AT LAKERIDGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1127 N. VICTORIA PARK RD.  
FT LAUDERDALE, FL 33304

**Current Mailing Address:**

PO BOX 4556  
FT LAUDERDALE, FL 33338 US

**FEI Number:** 56-2569766

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KOPF, ZACHARY  
1139 N. VICTORIA PARK ROAD  
FORT LAUDERDALE, FL 33304 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 PRES  
Name KOPF, ZACHARY  
Address 1139 N. VICTORIA PARK ROAD  
City-State-Zip: FT LAUDERDALE FL 33304

Title VP  
Name NORSOPH, DAVID  
Address 1752 NE 12 STREET  
City-State-Zip: FORT LAUDERDLAE FL 33304

Title SEC  
Name WADSWORTH, RHETT  
Address 1742 NE 12 STREET  
City-State-Zip: FORT LAUDERDLAE FL 33304

Title TRES  
Name BRADLEY, ERICA  
Address 1137 N VICTORIA PARK RD  
City-State-Zip: FORT LAUDERDALE FL 33304

*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:** ZACHARY KOPF

**PRESIDENT**

**03/08/2016**

Electronic Signature of Signing Officer/Director Detail

Date