

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05849

Entity Name: LAS PAMPAS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

1320 NW 3 AVE
GAINESVILLE, FL 32603

Current Mailing Address:

6110 NW 1ST PL STE B
GAINESVILLE, FL 32607 US

FEI Number: 59-2634251

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILD, ROBERT ERIC
1320 NW 3 AVE
GAINESVILLE, FL 32603 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 VP
Name MULLERSMAN, GOTI
Address 2288 NW 21ST AVE
City-State-Zip: GAINESVILLE FL 32605

Title TREASURER
Name TETRAULT, GREG
Address 3452 NW 37TH AVE
City-State-Zip: GAINESVILLE FL 32605

Title SECRETARY
Name SLOT, LISA
Address 3520 NW 37TH AVE
City-State-Zip: GAINESVILLE FL 32605

Title PRESIDENT
Name BROWN, MARY
Address 3434 NW 37TH AVE
City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR
Name SAMEC, SHELLEY
Address 3510 NW 37TH AVE
City-State-Zip: GAINESVILLE FL 32605

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: MARY BROWN

LCAM

03/25/2019

Electronic Signature of Signing Officer/Director Detail

Date