

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08717

FILED
Jan 12, 2016
Secretary of State
CC0767068549

Entity Name: THE LAKES OF MELBOURNE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4088 TIMBER TRAIL CT
MELBOURNE, FL 32904-9148

Current Mailing Address:

4088 TIMBER TRAIL CT
MELBOURNE, FL 32904-9148

FEI Number: 59-2401972

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATRICK F HEALY, ESQ
GRAY ROBINSON P.A.
1795 WEST NASA BLVD.
MELBOURNE, FL 32901 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 SCHWEIZER, CHRISTIAN
Address 3917 SEAGATE DRIVE
City-State-Zip: MELBOURNE FL 32904-9148

Title SD
Name LUTZ, RIE
Address 2466 LAKES OF MELBOURNE DR
City-State-Zip: MELBOURNE FL 32904

Title TD
Name ROBBINS, ROBERTA
Address 2112 MARINER PLACE
City-State-Zip: MELBOURNE FL 32904

Title D
Name WILLIAMS, LINDA
Address 2378 LAKES OF MELBOURNE DR
City-State-Zip: MELBOURNE FL 32904

Title VPD
Name LAROE, DENNY
Address 2233 INLET WAY
City-State-Zip: MELBOURNE FL 32904

Title D
Name SHALLENBERGER, GINNY
Address 2522 LAKES OF MELBOURNE DRIVE
City-State-Zip: MELBOURNE FL 32904

Title SOCIAL ACTIVITIES DIRECTOR
Name O'CONNELL, JANET
Address 3929 SEAGATE DRIVE
City-State-Zip: MELBOURNE FL 32904

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: ROBERTA ROBBINS

TREASURER

01/12/2016

Electronic Signature of Signing Officer/Director Detail

Date