2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08717

Entity Name: THE LAKES OF MELBOURNE HOMEOWNERS ASSOCIATION,

INC.

FILED
Jan 23, 2014
Secretary of State
CC7039906201

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 Title SD

NameBEST, CAROLNameELLS, BARBARAAddress4088 TIMBER TRAIL CTAddress2054 ROYAL DRIVECity-State-Zip:MELBOURNE FL 32904-9148City-State-Zip:MELBOURNE FL 32904

Title TD Title D

NameSPAMPINATO, JOSEPHNameHARMON, BARBARAAddress3897 SEAGATE DRIVEAddress3984 BAY PORT CT.City-State-Zip:MELBOURNE FL 32904City-State-Zip:MELBOURNE FL 32904

Title VPD Title D

Name LAVOIE, BERNIE Name SMITH, KAREN

Address 2410 LAKES OF MELBOURNE DRIVE Address 2542 LAKES OF MELBOURNE DRIVE

City-State-Zip: MELBOURNE FL 32904 City-State-Zip: MELBOURNE FL 32904

Title SOCIAL ACTIVITIES DIRECTOR

Name FERRIS, MARY ANN
Address 3892 SOUTHWIND 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: JOSEPH SPAMPINATO TREASURER /DIRECTOR 01/23/2014