

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09479

Entity Name: LAKES ESTATES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5602 MARQUESAS CIRCLE
#103
SARASOTA, FL 34233**Current Mailing Address:**PO BOX 18809
SARASOTA, FL 34276 US**FEI Number:** 59-2554656**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SUNSTATE ASSOCIATION MANAGEMENTGROUP, INC.
5602 MARQUESAS CIRCLE
#103
SARASOTA, FL 34233 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:** MICHELLE THIBEAULT

03/12/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name PENNEY, RICHARD
Address PO BOX 18809
City-State-Zip: SARASOTA FL 34276

Title DIRECTOR
Name GIRARD, ED
Address PO BOX 18809
City-State-Zip: SARASOTA FL 34276

Title PRESIDENT
Name BRUNO, KELLY
Address PO BOX 18809
City-State-Zip: SARASOTA FL 34276

Title VP
Name HINRICHS, JEFF
Address PO BOX 18809
City-State-Zip: SARASOTA FL 34276

Title TREASURER
Name STUTZMAN, CHAD
Address PO BOX 18809
City-State-Zip: SARASOTA FL 34276

Title DIRECTOR
Name HUDAK, GREG
Address PO BOX 18809
City-State-Zip: SARASOTA FL 34276

Title DIRECTOR
Name VIOLETT, MARY JO
Address PO BOX 18809
City-State-Zip: SARASOTA FL 34276

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: CHAD STUTZMAN

TREASURER

03/12/2020

Electronic Signature of Signing Officer/Director Detail

Date