### **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12930

Entity Name: LAKES AT LEESBURG RESIDENTS ASSOCIATION, INC.

FILED Feb 14, 2013 Secretary of State CC7016293337

# **Current Principal Place of Business:**

107 BUCCANEER DRIVE LEESBURG. FL 34788

## **Current Mailing Address:**

107 BUCCANEER DR LEESBURG, FL 34788 US

FEI Number: 59-2623495 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CONNOR, LORRAINE 10 KEY BISCAYNE WAY LEESBURG, FL 34788 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: LORRAINE CONNOR 02/14/2013

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

| Title | DP | Title | D1VP |
|-------|----|-------|------|
|       |    |       |      |

NameCARTER, JOANN KNameDURHAM, CLYDE AAddress40 SEA FERN DRAddress61 BUCCANEER DRCity-State-Zip:LEESBURG FL 34788City-State-Zip:LEESBURG FL 34788

Title D2VP Title DS

NameRIDDLE, ELLENNameADAMS, LYNDAAddress44 LATTICE DRAddress56 SEA FERN DRCity-State-Zip:LEESBURG FL 34788City-State-Zip:LEESBURG FL 34788

Title DT Title DAT

Name CONNOR, LORRAINE Name WOLFE, RONALD

Address 10 KEY BISCAYNE WAY Address 66 BUCCANEER DRIVE City-State-Zip: LEESBURG FL 34788 City-State-Zip: LEESBURG FL 34788

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: JOANN K. CARTER

DP

02/14/2013