## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000006492

Entity Name: LAKE PRESERVE HOMEOWNERS' ASSOCIATION, INC.

**FILED** Apr 30, 2024 **Secretary of State** 5594746369CC

## **Current Principal Place of Business:**

610 N WYMORE RD SUITE 200

MAITLAND, FL 32751

## **Current Mailing Address:**

610 N WYMORE RD SUITE 200 MAITLAND, FL 32751 US

FEI Number: 47-1023166 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SOUTHWEST PROPERTY MGMT OF CENTRAL FLORIDA 610 N WYMORE RD SUITE 200 MAITLAND, FL 32751 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: ELENA HENLEY 04/30/2024

> Date Electronic Signature of Registered Agent

> > Title

Officer/Director Detail:

Title Title **PRESIDENT** 

Name HOLLOWAY CASHMAN, LORI Name COLON, MYRNA V

610 N WYMORE RD 610 N WYMORE RD Address Address

SUITE 200 SUITE 200

City-State-Zip: MAITLAND FL 32751 City-State-Zip: MAITLAND FL 32751

Title **SECRETARY DIRECTOR** Name PARHAM, RONALD Name DOGLIO, KEVIN

Address 610 N WYMORE RD Address 610 N WYMORE RD

SUITE 200 SUITE 200 MAITLAND FL 32751 City-State-Zip: MAITLAND FL 32751

Title SECRETARY, TREASURER RICHARDSON ESPER, DAVID Name

**NATHANIEL** 

610 N WYMORE RD Address

City-State-Zip:

SUITE 200

City-State-Zip: MAITLAND FL 32751

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.

04/30/2024 SIGNATURE: MYRNA COLONN **PRESIDENT**