## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17417

Entity Name: LAUREL LAKE VILLAS OWNERS ASSOCIATION, INC.

FILED
Jan 14, 2017
Secretary of State
CC7863817101

Date

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

2200 SE 17TH ST OCALA, FL 34471

## **Current Mailing Address:**

1924 SE CLATTERBRIDGE ROAD OCALA, FL 34471 US

FEI Number: 59-2263077 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HOLLRAH, JACK L 1924 SE CLATTERBRIDGE ROAD OCALA, FL 34471 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: JACK L HOLLRAH 01/14/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title TD

Name HOLLRAH, JACK L Name TRICE, ELAINE

Address 1924 SE CLATTERBRIDGE ROAD Address 1946 SE CLATTERBRIDGE ROAD

City-State-Zip: OCALA FL 34471 City-State-Zip: OCALA FL 34471

Title D Title D

Name VANDENBURGH, HOWARD Name CARPENTER, CAROL
Address 1948 CLATTERBRIDGE RD Address 1936 CLATTERBRIDGE RD

City-State-Zip: OCALA FL 34471 City-State-Zip: OCALA FL 34471

Title SD Title DIRECTOR

Name JAMES, LOU Name COLEMAN, WILLIAM TOM

Address 2011 TWIN BRIDGE CIRCLE Address 1981 TWINBRIDGE CIRCLE

City-State-Zip: OCALA FL 34471 City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name NEASE, JOHN

Address 1972 TWINBRIDGE CIRCLE

City-State-Zip: OCALA FL 34471

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: JACK L. HOLLRAH PRESIDENT 01/14/2017

Electronic Signature of Signing Officer/Director Detail