

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000006433

**Entity Name:** PROPERTY OWNERS ASSOCIATION OF LAKE MARY  
WELLNESS AND TECHNOLOGY PARK INC.

**Current Principal Place of Business:**

800 N. MAGNOLIA AVE., SUITE 1625  
ORLANDO, FL 32083

**Current Mailing Address:**

800 N. MAGNOLIA AVE., SUITE 1625  
ORLANDO, FL 32083 US

**FEI Number: 84-2658224**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MCAFEE, MATTHEW S  
ONE INDEPENDENT DRIVE, SUITE 1200  
JACKSONVILLE, FL 32202 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 DP  
Name HEISTAND, JAMES R  
Address 800 N. MAGNOLIA AVE., SUITE 1625  
City-State-Zip: ORLANDO FL 32083

Title DVST  
Name TOOMEY, RICHARD J  
Address 800 N. MAGNOLIA AVE., SUITE 1625  
City-State-Zip: ORLANDO FL 32083

Title D  
Name BOTTENBORN, AARON  
Address 65 W STURTEVANT STREET, 2ND  
FLOOR  
City-State-Zip: ORLANDO FL 32806

*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: RICHARD J. TOOMEY**

**SECRETARY**

**02/10/2020**

Electronic Signature of Signing Officer/Director Detail

Date