

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31665

Entity Name: LOST LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

140 LOST LAKE DR STE 1
COCOA, FL 32926

Current Mailing Address:

140 LOST LAKE DR STE 1
COCOA, FL 32926 US

FEI Number: 59-2950946

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCULLOH, NEAL ESQ.
CLAYTON & MCCULLOH, ATTORNEYS AT LAW
1065 MAITLAND CENTER COMMONS BLVD.
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TD
Name WILSON, BETTY J
Address 140 LOST LAKE DR STE 1
City-State-Zip: COCOA FL 32926

Title DIRECTOR
Name MOORE, ROSEANN
Address 155 WOODSMILL BLVD.
City-State-Zip: COCOA FL 32926

Title PD
Name BODEN, BARBARA
Address 103 WOODSMILL BLVD.
City-State-Zip: COCOA FL 32926

Title VPD
Name SANNES, ROGER
Address 115 WOODSMILL BLVD.
City-State-Zip: COCOA FL 32926

Title SD
Name MEENAACHAN, BILL
Address 111 WOODSMILL BLVD.
City-State-Zip: COCOA FL 32926

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: BETTY WILSON

TREASURER

04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date