

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36151

FILED
Mar 17, 2015
Secretary of State
CC2334756365

Entity Name: LAKES ON THE GREEN HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O FIRST SERVICE RESIDENTIAL, INC.
5805 BLUE LAGOON DRIVE, SUITE # 310
MIAMI, FL 33126

Current Mailing Address:

C/O FIRST SERVICE RESIDENTIAL, INC.
5805 BLUE LAGOON DRIVE, SUITE # 310
MIAMI, FL 33126 US

FEI Number: 65-0188697

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIATION LAW GROUP
1200 BRICKELL AVE.
PH 2000
MIAMI, FL 33131 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 P/D
Name GALINDO, JAIME
Address C/O FSR
5805 BLUE LAGOON DR. 310
City-State-Zip: MIAMI FL 33126

Title STD
Name FLUHART, CYNTHIA
Address C/O FSR
5805 BLUE LAGOON DR. 310
City-State-Zip: MIAMI FL 33126

Title D
Name SIMON, ANTONIO
Address 5805 BLUE LAGOON DR., #310
City-State-Zip: MIAMI FL 33126

Title D
Name SPATERO, PHILLIP
Address 5805 BLUE LAGOON DR., #310
City-State-Zip: MIAMI FL 33126

Title VP
Name BELTRAN, ROBERTO
Address C/O FSR
5805 BLUE LAGOON DR. 310
City-State-Zip: MIAMI FL 33126

Title D
Name FORTICH, JORGE
Address C/O FSR
5805 BLUE LAGOON DR. 310
City-State-Zip: MIAMI FL 33126

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: JAIME GALINDO

PRESIDENT

03/17/2015

Electronic Signature of Signing Officer/Director Detail

Date