

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36331

Entity Name: LAGO WELLEBY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9715 W BROWARD BLVD
SUITE #235
PLANTATION, FL 33324

Current Mailing Address:

PO BOX 15624
PLANTATION, FL 33318 US

FEI Number: 65-0302274

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALKER, ARLINE
A & W PROPERTY MANAGEMENT, INC
773 N W 100 TERRACE
PLANTATION, FL 33324 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 SECRETARY, DIRECTOR
Name MORRISON, PATRICIA
Address 10687 LAGO WELLEBY DRIVE
City-State-Zip: SUNRISE FL 33351

Title PRESIDENT, DIRECTOR
Name MACDONALD, MATTHEW
Address 10675 LAGO WELLEBY DRIVE
City-State-Zip: SUNRISE FL 33351

Title DIRECTOR
Name MORRISON, JEAN
Address 10687 LAGO WELLEBY DRIVE
City-State-Zip: SUNRISE FL 33351

Title VP, DIRECTOR
Name VOLMAR, FREDERICK
Address 10633 LAGO WELLEBY DRIVE
City-State-Zip: SUNRISE FL 33351

Title TREASURER, DIRECTOR
Name MANNERS, RAYMOND
Address 10781 LAGO WELLEBY DRIVE
City-State-Zip: SUNRISE FL 33351

Title DIRECTOR
Name VARELA, FELIPE
Address 10789 LAGO WELLEBY DRIVE
City-State-Zip: SUNRISE FL 33351

Title DIRECTOR
Name GLENN, NICHOLAS T
Address 10733 LAGO WELLEBY DRIVE
City-State-Zip: SUNRISE FL 33351

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: MATTHEW MACDONALD

PRES

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date