

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43831

Entity Name: SKYLAKE ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6156 SABAL POINT CIR
PT ORANGE, FL 32128

Current Mailing Address:

P.O. BOX 291282
PT ORANGE, FL 32128

FEI Number: 59-3070839

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOCH, KAREN
6156 SABAL POINT CIR
PT ORANGE, FL 32128 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 ST
Name LASKY, ROBIN
Address 5947 DORAVILLE
City-State-Zip: PORT ORANGE FL 32127

Title VP
Name FERGUSON, LINDA
Address 5951 MARVILLE CIR.
City-State-Zip: PORT ORANGE FL 32127

Title PD
Name STEFANICK, MIKE
Address 5961 MARVILLE CIRCLE
City-State-Zip: PORT ORANGE FL 32127

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: MIKE STEFANICK

PRESIDENT

01/22/2014

Electronic Signature of Signing Officer/Director Detail

Date