

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46221

Entity Name: LONG ACRE LAKE PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**233 VIOLET DR
SANIBEL, FL 33957**Current Mailing Address:**233 VIOLET DR
SANIBEL, FL 33957**FEI Number:** 59-3107657**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REYNOLDS, JAMES L
233 VIOLET DRIVE
SANIBEL, FL 33957 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	PD
Name	BRAUN, JACK
Address	19390 PARK AVENUE
City-State-Zip:	DEEPHAVEN MN 55391

Title	DV
Name	KRUZICH, JOSEPH A
Address	209 VIOLET DRIVE
City-State-Zip:	SANIBEL FL 33957

Title	DT
Name	REYNOLDS, JAMES
Address	233 VIOLET DR
City-State-Zip:	SANIBEL FL 33957

Title	D
Name	MCGONNELL, TRICIA S
Address	784 VILLAGE CIRCLE
City-State-Zip:	GATES MILLS OH 44040

Title	DS
Name	WELCH, DEANA
Address	225 VIOLET DRIVE
City-State-Zip:	SANIBEL FL 33957

Title	D
Name	MILLARD, CHRISTOPHER J
Address	20394 TIMBERED ESTATES
City-State-Zip:	CARLINVILLE IL 62626

Title	D
Name	DUVAL, DENISE M
Address	1809 DIXON ROAD
City-State-Zip:	BALTIMORE MD 21209-3505

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: JAMES L. REYNOLDS**TREASURER/DIRECTOR****02/09/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date