

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N47426

**Entity Name:** GLENLAKES HOMEOWNERS ASSOCIATION ESTATE II, INC.

**Current Principal Place of Business:**

9000 GLENLAKES BLVD  
WEEKI WACHEE, FL 34613

**Current Mailing Address:**

9000 GLENLAKES BLVD  
WEEKI WACHEE, FL 34613 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CRAIGHEAD, DAVID  
9000 GLENLAKES BLVD  
WEEKI WACHEE, FL 34613 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 PARENTE, NICHOLAS  
Address 8360 SHERMAN CIR  
City-State-Zip: WEEKI WACHEE FL 34613

Title TD  
Name CRAIGHEAD, DAVID  
Address 9000 GLENLAKES BLVD  
City-State-Zip: WEEKI WACHEE FL 34613

Title SD  
Name SIMM, DENNIS R  
Address 9000 GLENLAKES BLVD  
City-State-Zip: WEEKI WACHEE FL 34613

*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:** NICHOLAS PARENTE

**DIRECTOR**

**04/04/2017**

Electronic Signature of Signing Officer/Director Detail

Date