## **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002794

Entity Name: LOCKS LANDING HOMEOWNERS ASSOCIATION, INC.

FILED
Jun 05, 2020
Secretary of State
1684802445CC

# **Current Principal Place of Business:**

459 NW PRIMA VISTA BLVD PORT SAINT LUCIE. FL 34983

## **Current Mailing Address:**

C/O SIGNATURE PROPERTY MGMT 459 NW PRIMA VISTA BLVD PORT SAINT LUCIE. FL 34983 US

FEI Number: 65-0494674 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BARBARA A. KREITZ COOK, ESQ. ROYAL PALM FINANCIAL CENTER 759 SW FEDERAL HWY SUITE 216 STUART, FL 34994 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 PRESIDENT Title VP

Name GUBERMAN, GALEN Name LEPAK, PATRICK

Address 459 NW PRIMA VISTA BLVD Address 459 NW PRIMA VISTA BLVD

City-State-Zip: PORT SAINT LUCIE FL 34983 City-State-Zip: PORT SAINT LUCIE FL 34983

Title TREASURER/DIRECTOR Title SECRETARY
Name ODENTHAL, PAUL Name CLINE, JULIE

Address 459 NW PRIMA VISTA BLVD Address 459 NW PRIMA VISTA BLVD

City-State-Zip: PORT SAINT LUCIE FL 34983 City-State-Zip: PORT SAINT LUCIE FL 34983

Title DIRECTOR

Name PAJKURICK, NED

Address 459 NW PRIMA VISTA BLVD
City-State-Zip: PORT SAINT LUCIE FL 34983

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: GALEN GUBERMAN

**PRESIDENT** 

06/05/2020