

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000022666

**FILED
Mar 20, 2018
Secretary of State
CC4544770535**

Entity Name: VILLA GRANDE ON SAXON, INC.

Current Principal Place of Business:

650 S. NORTHLAKE BLVD.
SUITE 450
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

650 S. NORTHLAKE BLVD.
SUITE 450
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 20-4343681

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LECESSE DEVELOPMENT CORPORATION
650 S. NORTHLAKE BLVD.
SUITE 450
ALTAMONTE SPRINGS, FL 32701 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 PTD
Name LECCESE, SALVADOR F
Address 650 S. NORTHLAKE BLVD.; SUITE 450
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP
Name LECCESE, ANDREW
Address 650 S. NORTHLAKE BLVD. SUITE 450
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP,S
Name FLYNN, JOHN
Address 650 S. NORTHLAKE BLVD.
 SUITE 450
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP
Name FLYNN, JOHN
Address 650 S. NORTHLAKE BLVD.
 SUITE 450
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SALVADOR F. LECCESE

PTD

03/20/2018

Electronic Signature of Signing Officer/Director Detail

Date