2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2017
Secretary of State
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Entity Name: LAKEVIEW ASSOCIATED ENTERPRISES-PHASE 1, INC.

Current Principal Place of Business:

ATTN: EXECUTIVE OFFICE
1221 W. LAKEVIEW AVENUE
PENSACOLA, FL 32501

Current Mailing Address:

ATTN: EXECUTIVE OFFICE
1221 W. LAKEVIEW AVENUE
PENSACOLA, FL 32501

FEI Number: 61-1711170

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CALLAHAN, ELIZABETH C
1717 N. "E" STREET
SUITE 320
PENSACOLA, FL 32501 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	CHAIRMAN	Title	VP
Name	HILL , M. ALLISON	Name	WILLIAMS, TRA
Address	ATTN: EXECUTIVE OFFICE 1221 W. LAKEVIEW AVENUE	Address	ATTN: EXECUTIVE OFFICE 1221 W. LAKEVIEW AVENUE
City-State-Zip:	PENSACOLA FL 32501	City-State-Zip:	PENSACOLA FL 32501
Title	DIRECTOR	Title	DIRECTOR
Name	PORTER, JOHN	Name	WHITAKER , SANDY
Address	ATTN: EXECUTIVE OFFICE 1221 W. LAKEVIEW AVENUE	Address	ATTN: EXECUTIVE OFFICE 1221 W. LAKEVIEW AVENUE
City-State-Zip:	PENSACOLA FL 32501	City-State-Zip:	PENSACOLA FL 32501
Title	DIRECTOR	Title	DIRECTOR
Name	SALAMIDA , SHAWN	Name	GOODSPEED , DENNIS
Address	ATTN: EXECUTIVE OFFICE 1221 W. LAKEVIEW AVENUE	Address	ATTN: EXECUTIVE OFFICE 1221 W. LAKEVIEW AVENUE
City-State-Zip:	PENSACOLA FL 32501	City-State-Zip:	PENSACOLA FL 32501
Title	DIRECTOR	Title	ASST. SECRETARY
Name	GILMARTIN, RICH	Name	WILKERSON, DONALD
Address	ATTN: EXECUTIVE OFFICE 1221 W. LAKEVIEW AVENUE	Address	ATTN: EXECUTIVE OFFICE 1221 W. LAKEVIEW AVENUE
City-State-Zip:	PENSACOLA FL 32501	City-State-Zip:	PENSACOLA FL 32501

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: DONALD WILKERSON ASSISTANT SECRETARY 04/28/2017

Electronic Signature of Signing Officer/Director Detail — Date