

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000005033

Entity Name: ROCK LAKE BUSINESS CENTER OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**1197 PEACHTREE STREET NE
SUITE 600
ATLANTA, GA 30361**Current Mailing Address:**1197 PEACHTREE STREET NE
SUITE 600
ATLANTA, GA 30361 US**FEI Number:** 83-2278612**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name MINOR, GARY
Address 1197 PEACHTREE STREET NE
SUITE 600
City-State-Zip: ATLANTA GA 30361

Title CHAIRMAN OF THE BOARD
Name FABER, NICK
Address 200 E. BROWARD BOULEVARD
SUITE 1030
City-State-Zip: FORT LAUDERDALE FL 33301

Title TREASURER
Name PATEL, SMITA
Address 1197 PEACHTREE STREET NE
SUITE 600
City-State-Zip: ATLANTA GA 30361

Title PRESIDENT
Name FABER, NICK
Address 200 E. BROWARD BOULEVARD
SUITE 1030
City-State-Zip: FORT LAUDERDALE FL 33301

Title DIRECTOR
Name FABER, NICK
Address 200 E. BROWARD BOULEVARD
SUITE 1030
City-State-Zip: FORT LAUDERDALE FL 33301

Title SECRETARY
Name KERSEY, PAT
Address 1197 PEACHTREE STREET NE
SUITE 600
City-State-Zip: ATLANTA GA 30361

Title VP
Name ERHARDT, GWEN
Address 1197 PEACHTREE STREET NE
SUITE 600
City-State-Zip: ATLANTA GA 30361

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: NICK FABER

PRESIDENT

04/23/2021

Electronic Signature of Signing Officer/Director Detail

Date