

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

DOCUMENT# N02000000610

**Entity Name:** EAGLE POINT HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**May 07, 2020**  
**Secretary of State**  
**2853752763CC**

**Current Principal Place of Business:**

5121 SOUTH LAKELAND DR  
SUITE 1  
LAKELAND, FL 33813

**Current Mailing Address:**

P O BOX 92797  
LAKELAND, FL 33804 US

**FEI Number: 54-2070969**

**Certificate of Status Desired: No**

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

HALL, JOHN  
5121 SOUTH LAKELAND DR  
SUITE 1  
LAKELAND, FL 33813 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: JOHN HALL**

**05/07/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER, SECRETARY  
Name           LAKE, STEPHANIE  
Address        5121 SOUTH LAKELAND DR  
                  SUITE 1  
City-State-Zip: LAKELAND FL 33813

Title           PRESIDENT  
Name           LEVY, MIKE  
Address        5121 SOUTH LAKELAND DR  
                  SUITE 1  
City-State-Zip: LAKELAND FL 33813

Title           VP  
Name           WALZ III, MICHAEL  
Address        5121 SOUTH LAKELAND DR  
                  SUITE 1  
City-State-Zip: LAKELAND FL 33813

*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: MIKE LEVY**

**PRESIDENT**

**05/07/2020**

Electronic Signature of Signing Officer/Director Detail

Date