

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737596

Entity Name: BRANDYWINE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**941 KINGS MOUNTAIN RD.
DELAND, FL 32720**Current Mailing Address:**BRANDYWINE HOA
P.O. BOX 37
DELEON SPRINGS, FL 32130-0037 US**FEI Number:** 59-1989295**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SLACHTER, DAVID
935 KINGS MOUNTAIN ROAD
DELAND, FL 32720 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 SECRETARY/DIRECTOR
Name BENUCCI, LILIANE
Address 1045 W. VILLAGE GREEN RD.
City-State-Zip: DELAND FL 32720

Title PRESIDENT, DIRECTOR
Name MYERS, LORIN B.
Address 941 KINGS MOUNTAIN RD.
City-State-Zip: DELAND FL 32720

Title DIRECTOR
Name HILL, DIANE
Address 1060 BURGOYNE RD.
City-State-Zip: DELAND FL 32720

Title DIRECTOR
Name WEBER, RENEE
Address 2715 N SARATOGA RD.
City-State-Zip: DELAND FL 32720

Title DIRECTOR
Name CAMPANELLA, MICHAEL
Address 1005 BURGOYNE RD
City-State-Zip: DELAND FL 32720

Title DIRECTOR, VP
Name HOUCK, TISA
Address 800 FREEMANS FARM RD.
City-State-Zip: DELAND FL 32720

Title DIRECTOR/TREASURER
Name DE LAND, STEPHEN
Address 2720 CONCORD RD.
City-State-Zip: DELAND FL 32720

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: LORIN B. MYERS**PRESIDENT****01/14/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date