

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737880

**FILED**  
**Apr 15, 2019**  
**Secretary of State**  
**3038767969CC**

**Entity Name:** BARCLAY WOODS HOMEOWNERS ASSOC., INC.

**Current Principal Place of Business:**

503 ARVERN COURT  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

503 ARVERN COURT  
ALTAMONTE SPRINGS, FL 32701 US

**FEI Number:** 59-1751099

**Certificate of Status Desired:** No

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

HOOVER, PATRICIA  
503 ARVERN CT  
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:** PATRICIA HOOVER

04/15/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TD  
Name HOOVER, PATRICIA  
Address 503 ARVERN COURT  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title PD  
Name MCPHERSON, MISTY  
Address 511 ARVERN CT  
City-State-Zip: ALTAMONTE SPRGS FL 32701

Title PRESIDENT  
Name JANINE, MUELLER  
Address 419 BARCLAY AVENUE  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VD  
Name COHEN, IRMA  
Address 505 ARVERN CT  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR  
Name STOVER, ROGER  
Address 513 ARVERN COURT  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR  
Name LONG, CARL  
Address 402 BARCLAY AVENUE  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title SECRETARY  
Name HEINZ, CASH  
Address 419 BARCLAY AVENUE  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR  
Name MCFADDEN, RICHARD  
Address 501 ARVERN COURT  
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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PATRICIA HOOVER

**TREASURER**

04/15/2019

Electronic Signature of Signing Officer/Director Detail

Date