

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737880

FILED
Mar 23, 2022
Secretary of State
3633701610CC

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

03/23/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

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

Title VP
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 PRESIDENT
Name LOVESTRAND, MIRANDA
Address 604 ARVERN DRIVE
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title DIRECTOR
Name MCFADDEN, RICHARD
Address 501 ARVERN COURT
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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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

DIRECTOR

03/23/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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