# 2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 738330** 

Entity Name: CUMBERLAND CIRCLE COMMUNITY ASSOCIATION, INC.

FILED
Aug 26, 2022
Secretary of State
5518334271CC

#### **Current Principal Place of Business:**

10,000 SW 52ND AVE CLUBHOUSE GAINESVILLE, FL 32608

### **Current Mailing Address:**

C/O GUARDIAN ASSOCIATION MANAGEMENT 10,000 SW 52ND AVE CLUBHOUSE GAINESVILLE, FL 32608 US

FEI Number: 59-1883157 Certificate of Status Desired: No

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

GUARDIAN ASSOCIATION MANAGEMENT C/O GUARDIAN ASSOCIATION MANAGEMENT 10,000 SW 52ND AVE CLUBHOUSE GAINESVILLE, FL 32608 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: THOMAS EATON 08/26/2022

Electronic Signature of Registered Agent

Officer/Director Detail:

 Title
 DIRECTOR
 Title
 SECRETARY

 Name
 LUTZ, DANNY
 Name
 CARR, MIMI

 Address
 1604 NW 19 CIR
 Address
 1673 NW 19 CIR

City-State-Zip: GAINESVILLE FL 32605 City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR Title PRESIDENT

NameMULLINGAN, RICKNameLAFRAMENTA, JOANNEAddress1666 NW 19 CIRAddress1596 NW 19TH CIRCLECity-State-Zip:GAINESVILLE FL 32605City-State-Zip:GAINESVILLE FL 32605

Title DIRECTOR Title DIRECTOR

NameGLEASON, JOSEPHNameTHORNDIKE, MARTIAddress1660 NW 19TH CIRCLEAddress1626 NW 19TH CIRCLECity-State-Zip:GAINESVILLE FL 32605City-State-Zip:GAINESVILLE FL 32605

Title VP Title DIRECTOR

NameGROFF, BILLIENameHUTCHINSON, LORALEEAddress1642 NW 19TH CIRCLEAddress1637 NW 19TH CIRCLECity-State-Zip:GAINESVILLE FL 32605City-State-Zip:GAINESVILLE FL 32605

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SIGNATURE: VICTOR MARTINELLI

TREASURER 08/26/2022

Date

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.

## Officer/Director Detail Continued:

Title TREASURER

Name MARTINELLI, VICTOR
Address 2514 NW 31ST TER

City-State-Zip: GAINESVILLE FL 32605