# 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: SARAH K GORMAN

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# 741367

Entity Name: GLEN HOMEOWNERS'S ASSOCIATION INC.

### Current Principal Place of Business:

3323 WEST SWANN AVENUE TAMPA, FL 33609

## **Current Mailing Address:**

3323 WEST SWANN AVENUE TAMPA, FL 33609 US

# FEI Number: 59-1796819

### Name and Address of Current Registered Agent:

GORMAN, SARAH 3323 WEST SWANN AVENUE TAMPA, FL 33609 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	SARAH GORMAN			04/09/2020
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	DIRECTOR	
Name	GORMAN, SARAH	Name	FOSTER, JUDY	
Address	3323 W. SWANN AVENUE	Address	616 SOUTH GLEN AVENUE	
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33609	
Title	TREASURER	Title	SECRETARY	
Name	FRISCIA, KEN	Name	ZAYAS, AMBER	
Address	614 SOUTH GLEN AVENUE	Address	3321 WEST SWANN AVENUE	
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33609	
Title	DIRECTOR	Title	DIRECTOR	
Name	SCHLOSSMAN, KYLE	Name	IORDACHE, ADRIAN	
Address	3319 W SWANN AVE	Address	612 S GLENN AVE	
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33609	

PRESIDENT

04/09/2020

FILED Apr 09, 2020 Secretary of State 6415993390CC

Certificate of Status Desired: Yes

Date