

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759304

**FILED**  
**Jan 20, 2017**  
**Secretary of State**  
**CC2890088416**

**Entity Name:** CARROLLWOOD SPRINGS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4917 EHRLICH ROAD SUITE 104  
TAMPA, FL 33624

**Current Mailing Address:**

4917 EHRLICH ROAD SUITE 104  
TAMPA, FL 33624 US

**FEI Number: 59-2542868**

**Certificate of Status Desired: No**

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

HELBIG, DENISE  
4917 EHRLICH ROAD SUITE 104  
TAMPA, FL 33624 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            PRESIDENT  
Name            HEKIMIAN-WILLIAMS, ANDREA  
Address        4917 EHRLICH ROAD SUITE 104  
City-State-Zip: TAMPA FL 33624

Title            TREASURER  
Name            RUSKA, CRAIG  
Address        4917 EHRLICH ROAD SUITE 104  
City-State-Zip: TAMPA FL 33624

Title            VP  
Name            MCDANIEL, WAYNE  
Address        4917 EHRLICH RD SUITE 104  
City-State-Zip: TAMPA FL 33624

*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: ANDREA HEKIMIAN-WILLIAMS

PRESIDENT

01/20/2017

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date