Entity Name: LAUREL RUN HOMEOWNERS ASSOCIATION, INC.

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

C/O BOSSHARDT PROPERTY MANAGEMENT 2437 SE 17TH STREET SUITE 201 OCALA, FL 34471

## **Current Mailing Address:**

**DOCUMENT# 762940** 

C/O BOSSHARDT PROPERTY MANAGEMENT 2437 SE 17TH STREET SUITE 201 OCALA, FL 34471 US

### FEI Number: NOT APPLICABLE

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

BOSSHARDT PROPERTY MANAGEMENT LLC C/O BOSSHARDT PROPERTY MANAGEMENT 2437 SE 17TH STREET SUITE 201 OCALA, FL 34471 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,

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	: GARRY GRIFFIN		04/25/2022
	Electronic Signature of Registered Agent		Date
Officer/Director Detail :			
Title	DIRECTOR	Title	т
Name	ADAMS, RUS	Name	ARLINE, JOHN
Address	C/O BOSSHARDT PROPERTY MANAGEMENT 2437 SE 17TH STREET SUITE 201	Address	C/O BOSSHARDT PROPERTY MANAGEMENT 2437 SE 17TH STREET SUITE 201
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471
Title	VP	Title	PRESIDENT
Name	KLEIN, RANDY	Name	GREEN, JOHN
Address	C/O BOSSHARDT PROPERTY MANAGEMENT 2437 SE 17TH STREET SUITE 201	Address	C/O BOSSHARDT PROPERTY MANAGEMENT 2437 SE 17TH STREET SUITE 201
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471
Title	TREASURER	Title	DIRECTOR
Name	GRAVES, TANIA	Name	BATSEL, ROBERT
Address	C/O BOSSHARDT PROPERTY MANAGEMENT 2437 SE 17TH STREET SUITE 201	Address	C/O BOSSHARDT PROPERTY MANAGEMENT 2437 SE 17TH STREET SUITE 201
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34471
Title	DIRECTOR	Title	DIRECTOR
Name	BLISS, ROYAL	Name	MOORE, ROBERT
Address	C/O BOSSHARDT PROPERTY MANAGEMENT	Address	2437 SE 17TH STREET SUITE 201
City-State-Zip:	2437 SE 17TH STREET SUITE 201 OCALA FL 34471	City-State-Zip:	OCALA FL 34471

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: JOHN GREEN

PRESIDENT

# FILED Apr 25, 2022 Secretary of State 6888051526CC

Certificate of Status Desired: No