

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767294

**FILED
Mar 30, 2016
Secretary of State
CC0218569087**

Entity Name: LONGWOOD OF FT. PIERCE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1505 NEBRASKA AVE.
FT. PIERCE, FL 34950

Current Mailing Address:

1505 NEBRASKA AVE.
FT. PIERCE, FL 34950

FEI Number: 59-2759797

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS, DEBORAH ESQ
ROSS EARLE & BONAN, P.A.
789 S FEDERAL HWY, SUITE 101
STUART, FL 34994 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 VPD
Name GILFILLAN, JAMES H.
Address 1505 NEBRASKA AVE.
City-State-Zip: FT. PIERCE FL 34950

Title SD
Name WILSON, BOBBYLEE
Address 1505 NEBRASKA AVE.
City-State-Zip: FT. PIERCE FL 34950

Title TD
Name KNAPP, STEVEN
Address 1505 NEBRASKA AVE
City-State-Zip: FORT PIERCE FL 34950

Title PD
Name SUELLEN, HOLLAND L.
Address 1505 NEBRASKA AVE.
City-State-Zip: FT. PIERCE FL 34950

Title ASD
Name CAHILL, MICHAEL
Address 1505 NEBRASKA AVE.
City-State-Zip: FT. PIERCE FL 34950

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: BOBBYLEE WILSON

SECRETARY

03/30/2016

Electronic Signature of Signing Officer/Director Detail

Date