## 2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 767294** 

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 & ENSOR, P.A. 789 S FEDERAL HWY SUITE 100 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

FILED Aug 06, 2019

Secretary of State 3267462392CC

## Officer/Director Detail:

Title VPD Title SD

NameTERHUNE, PATRICIANameSBANO, MICHELEAddress1505 NEBRASKA AVE.Address1505 NEBRASKA AVE.City-State-Zip:FT. PIERCE FL 34950City-State-Zip:FT. PIERCE FL 34950

Title TD Title PRESIDENT

NameKNAPP, STEVENNameELROD, MARTHAAddress1505 NEBRASKA AVEAddress1505 NEBRASKA AVE.City-State-Zip:FORT PIERCE FL 34950City-State-Zip:FT. PIERCE FL 34950

City-State-Zip: FORT PIERCE FL 34950 City-State-Zip: FT. PIERCE FL

Title ASSISTANT SECRETARY
Name LUMBERT, KAREN
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: MICHELE SBANO SECRETARY 08/06/2019