

2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 768917

Entity Name: WOODLAND ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1791 NW 21ST CT
CRYSTAL RIVER, FL 34428

Current Mailing Address:

PO BOX 1603
CRYSTAL RIVER, FL 34423-1603 US

FEI Number: 59-2625913

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GAUSE, SONYA
1791 NW 21ST CT
CRYSTAL RIVER, FL 34428 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: SONYA GAUSE

10/27/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name CARSON, CAROLE
Address 2111 NW 17TH STREET
City-State-Zip: CRYSTAL RIVER FL 34428

Title OFFICER
Name COBLE, KRISTIN
Address 1611 NW 20TH AVE
City-State-Zip: CRYSTAL RIVER FL 34428

Title OFFICER
Name CUNNINGHAM , KAREN
Address 2011 NW 15TH ST
City-State-Zip: CRYSTAL RIVER FL 34428

Title OFFICER
Name LIVINGSTON , MARK
Address 1931 NW 18TH STREET
City-State-Zip: CRYSTAL RIVER FL 34428

Title TREASURER
Name GAUSE, SONYA D
Address 1791 NW 21ST CT
City-State-Zip: CRYSTAL RIVER FL 34428

Title OFFICER
Name STRAWN, SHARON
Address 1330 NW 19TH ST
City-State-Zip: CRYSTAL RIVER FL 34428

Title OFFICER
Name OWEN, GINNY
Address 1951 NW 15TH ST
City-State-Zip: CRYSTAL RIVER FL 34428

Title OFFICER
Name BUTLER, HANK
Address 2110 17TH ST
City-State-Zip: CRYSTAL RIVER FL 34428

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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: SONYA GAUSE

TREASURER

10/27/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name HASTINGS, MINDI
Address 1514 NW 17TH COURT
City-State-Zip: CRYSTAL RIVER FL 34428

Title 2ND VP
Name MUNSON, TOM
Address 1950 NW 19TH STREET
City-State-Zip: CRYSTAL RIVER FL 34428

Title SECRETARY
Name KOSTELNICK , GAIL
Address 2021 NW 13TH ST
City-State-Zip: CRYSTAL RIVER FL 34428

Title OFFICER
Name PATRICK, JOHN
Address 1931 NW 16TH STREET
City-State-Zip: CRYSTAL RIVER FL 34428

Title OFFICER
Name TAVAREZ, MIRIAM
Address 1931 NW 16TH ST
City-State-Zip: CRYSTAL RIVER FL 34428