

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002215

FILED
Feb 25, 2022
Secretary of State
2618535453CC

Entity Name: GLENHAVEN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PROFESSIONAL COMMUNITY MGMT, INC
786 BLANDING BLVD., #118
ORANGE PARK, FL 32065

Current Mailing Address:

PROFESSIONAL COMMUNITY MGMT, INC
786 BLANDING BLVD., #118
ORANGE PARK, FL 32065

FEI Number: 59-3675324

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PERRY, ALAN
786 BLANDING BLVD., #118
ORANGE PARK, FL 32065 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 LEE, JONATHAN
Address PROFESSIONAL COMMUNITY MGMT,
 INC
 786 BLANDING BLVD., #118
City-State-Zip: ORANGE PARK FL 32065

Title TREASURER
Name WHITE, PERRY
Address PROFESSIONAL COMMUNITY MGMT,
 INC
 786 BLANDING BLVD., #118
City-State-Zip: ORANGE PARK FL 32065

Title DIRECTOR
Name HAACK, CHARYL
Address PROFESSIONAL COMMUNITY MGMT,
 INC
 786 BLANDING BLVD., #118
City-State-Zip: ORANGE PARK FL 32065

Title SECRETARY
Name FERRI, KARRY
Address 786 BLANDING BLVD STE 118
City-State-Zip: ORANGE PARK FL 32065

Title DIRECTOR
Name DAHL, CHRIS
Address 786 BLANDING BLVD
 118
City-State-Zip: ORANGE PARK FL 32065

Title DIRECTOR
Name JURAS, GINA
Address 786 BLANDING BLVD
 118
City-State-Zip: ORANGE PARK FL 32065

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: LEE , JONATHAN

PD

02/25/2022

Electronic Signature of Signing Officer/Director Detail

Date