

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000002688

**Entity Name:** STRATFORD POINTE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**7145 TURNER ROAD  
SUITE 101  
ROCKLEDGE, FL 32955**Current Mailing Address:**7145 TURNER ROAD  
SUITE 101  
ROCKLEDGE, FL 32955**FEI Number:** 59-3653102**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**OMEGA COMMUNITY MANAGEMENT, INC.  
7145 TURNER ROAD  
SUITE 101  
ROCKLEDGE, FL 32955 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	HOBERT, STEVE
Address	7145 TURNER ROAD SUITE 101
City-State-Zip:	ROCKLEDGE FL 32955

Title	VP
Name	DAVIS, KAREN
Address	7145 TURNER ROAD SUITE 101
City-State-Zip:	ROCKLEDGE FL 32955

Title	TREASURER
Name	HEISE, JAN
Address	7145 TURNER ROAD SUITE 101
City-State-Zip:	ROCKLEDGE FL 32955

Title	SECRETARY
Name	BERNKOPF, PAUL
Address	7145 TURNER ROAD SUITE 101
City-State-Zip:	ROCKLEDGE FL 32955

Title	DIRECTOR
Name	BEACHLEY, PRISCILLA
Address	7145 TURNER ROAD SUITE 101
City-State-Zip:	ROCKLEDGE FL 32955

*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:** HOBERT , STEVE

PRESIDENT

04/21/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date