

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005155

Entity Name: VIRGINIA CROSSING HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685**Current Mailing Address:**4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685**FEI Number:** 59-3534571**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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	PRES
Name	GROTH, ED
Address	4151 WOODLANDS PARKWAY
City-State-Zip:	PALM HARBOR FL 34685

Title	VP
Name	DEBIEN, PHYLLIS
Address	4151 WOODLANDS PARKWAY
City-State-Zip:	PALM HARBOR FL 34685

Title	SEC
Name	BRZEZINSKI, GAIL
Address	4151 WOODLANDS PARKWAY
City-State-Zip:	PALM HARBOR FL 34685

Title	TRE
Name	O'BRIEN, TOM
Address	4151 WOODLANDS PARKWAY
City-State-Zip:	PALM HARBOR FL 34685

Title	D
Name	HARRELL, CANDY
Address	4151 WOODLANDS PARKWAY
City-State-Zip:	PALM HARBOR FL 34685

Title	DIRECTOR
Name	COYNE, JOHN
Address	4151 WOODLANDS PARKWAY
City-State-Zip:	PALM HARBOR FL 34685

Title	DIRECTOR
Name	HOUSE, BILL
Address	4151 WOODLANDS PARKWAY
City-State-Zip:	PALM HARBOR FL 34685

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: ED GROTH**PRESIDENT****04/05/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date