

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000000761

**Entity Name:** THE GLEN EAGLE PARK HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Mar 26, 2024**  
**Secretary of State**  
**3627142303CC**

**Current Principal Place of Business:**

2695 DOBBS ROAD  
SAINT AUGUSTINE, FL 32086

**Current Mailing Address:**

2695 DOBBS ROAD  
SAINT AUGUSTINE, FL 32086 US

**FEI Number: 90-0073345**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LAUSON, VALERIE  
2695 DOBBS ROAD  
SAINT AUGUSTINE, FL 32086 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: VALERIE LAUSON**

**03/26/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DT  
Name GINN, JOHN ARTHUR III  
Address 421 ST. JOHNS AVE.  
SUITE 3  
City-State-Zip: PALATKA FL 32177

Title DP  
Name GINN, JUDITH  
Address 421 ST. JOHNS AVE.  
SUITE 3  
City-State-Zip: PALATKA FL 32177

Title DS  
Name BACHMAN, DAWN  
Address 421 ST. JOHNS AVE.  
SUITE 3  
City-State-Zip: PALATKA FL 32177

Title MANAGER  
Name LAUSON, VALERIE  
Address 2695 DOBBS ROAD  
City-State-Zip: SAINT AUGUSTINE FL 32086

*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: VALERIE LAUSON**

**MANAGER**

**03/26/2024**

Electronic Signature of Signing Officer/Director Detail

Date