

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N01051

**Entity Name:** CROWN COLONY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O REALMANAGE  
11784 WEST SAMPLE ROAD SUITE 103  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

C/O REALMANAGE  
PO BOX 803555  
DALLAS, TX 75380 US

**FEI Number:** 59-2519005

**Certificate of Status Desired:** No

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

STEVENS & GOLDWYN PA  
2 S UNIVERSITY DR #329  
PLANTATION, FL 33324 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:** STEVENS & GOLDWYN

**08/31/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER  
Name            ERICE, CATERINA  
Address        C/O REALMANAGE  
                 11784 WEST SAMPLE ROAD SUITE  
                 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title            SECRETARY  
Name            OROL, DOLORES  
Address        C/O REALMANAGE  
                 11784 WEST SAMPLE ROAD SUITE  
                 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title            DIRECTOR  
Name            CONOWAL, TED  
Address        C/O REALMANAGE  
                 11784 WEST SAMPLE ROAD SUITE  
                 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title            PRESIDENT  
Name            MCCOY, MARIANNE  
Address        C/O REALMANAGE  
                 11784 WEST SAMPLE ROAD SUITE  
                 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title            DIRECTOR  
Name            GONZALEZ, DANA  
Address        C/O REALMANAGE  
                 11784 WEST SAMPLE ROAD SUITE  
                 103  
City-State-Zip: CORAL SPRINGS FL 33065

*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:** MARIANNE MCCOY

**PRESIDENT**

**08/31/2023**

Electronic Signature of Signing Officer/Director Detail

Date