2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT
DOCUMENT\# N02000006360
Entity Name: DUNMORE AT HALIFAX PLANTATION HOMEOWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

INISHMORE \& CONNEMARA DRIVES
ORMOND BEACH, FL 32174

## Current Mailing Address:

PO BOX 1866
ORMOND BEACH, FL 32175 US
FEI Number: 22-3884130
Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SHAPIRO, MATTHEW C ESQ (RICE LAW FIRM)
222 SEABREEZE BLVD
DAYTONA BEACH, FL 32118 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 | P | Title | VP |
| :--- | :--- | :--- | :--- |
| Name | RANDLE, THOMAS | Name | SPAULDING, ROBERT |
| Address | PO BOX 1866 | Address | PO BOX 1866 |
| City-State-Zip: | ORMOND BEACH FL 32175 | City-State-Zip: | ORMOND BEACH FL 32175 |
| Title | SECRETARY/TREASURER | Title | GROUNDS CHAIRPERSON |
| Name | SHEA, DIANE | Name | BROWN, DAVID |
| Address | PO BOX 1866 | Address | PO BOX 1866 |
| City-State-Zip: | ORMOND BEACH FL 32175 | City-State-Zip: | ORMOND BEACH FL 32175 |
| Title | DIRECTOR |  |  |
| Name | RUTTENBERG, JODY |  |  |
| Address | PO BOX 1866 |  |  |
| City-State-Zip: | ORMOND BEACH FL 32175 |  |  |

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: DIANE SHEA
TREASURER 01/27/2020

