

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002178

Entity Name: HOME OWNERS ASSOCIATION OF STERLING PARK, INC.**Current Principal Place of Business:**135 STERLING DR E.
LAKELAND, FL 33815**Current Mailing Address:**135 STERLING DR E.
LAKELAND, FL 33815 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DEMETRE, SHARRY K TREASURER
135 STERLING DR E.
LAKELAND, FL 33815 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: SHARRY DEMETRE****03/17/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ADKINS, KEITH
Address 83 LUCILLE ST
City-State-Zip: LAKELAND FL 33815

Title D
Name REICHERT, KEN D
Address 44 RIVER TRIANGLE
City-State-Zip: LAKELAND FL 33815

Title DIRECTOR
Name LAMBERT, PHYLLIS
Address 175 STERLING DR, N
City-State-Zip: LAKELAND FL 33815

Title SECRETARY
Name SAULS-DAGG, CHERYL
Address 171 STERLING N.
City-State-Zip: LAKELAND FL 33815

Title T, TREASURER
Name DEMETRE, SHARRY
Address 135 STERLING DR E.
City-State-Zip: LAKELAND FL 33815

Title D
Name YON, GAIL
Address 315 STERLING DR. W.
City-State-Zip: LAKELAND FL 33815

Title DIRECTOR
Name BREHENY, TIMOTHY
Address 176 STERLING DR. N
City-State-Zip: LAKELAND FL 33815

Title DIRECTOR
Name MEYER, JEAN
Address 277 LYNDOL
City-State-Zip: LAKELAND FL 33815

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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: SHARRY DEMETRE**TREASURER****03/17/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name MOLNAR, ROGER
Address 242 ESTHER ST
City-State-Zip: LAKELAND FL 33815

Title DIRECTOR
Name MALLETTE, ARTHUR
Address 2 LAURN
City-State-Zip: LAKELAND FL 33815