2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000007164

Entity Name: THE RESERVE AT HUNTINGTON PROPERTY OWNERS

ASSOCIATION, INC.

Current Principal Place of Business:

C/O GRS MANAGEMENT, INC 8140 NW 155 ST SUITE 101 MIAMI LAKES, FL 33016

Current Mailing Address:

C/O GRS MANAGEMENT, INC 8140 NW 155 STREET SUITE 101 MIAMI LAKES, FL 33016 US

FEI Number: 11-3699544 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

MIAMI LAKES FL 33016

STEVEN S. VALANCY, P.A. 311 SE 13 STREET FORT LAUDERDALE, FL 33316 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED

Mar 19, 2019

Secretary of State 5923735941CC

Officer/Director Detail:

| Title | DIRECTOR | Title | SECRETARY |
|---------|---------------------------------|---------|---------------------------------|
| Name | MATOS, ARELIS | Name | SARDINIA, CAROL |
| Address | 8140 NW 155 STREET SUITE 101 | Address | 8140 NW 155 STREET SUITE 101 |

SUITE 101

MIAMI LAKES FL 33016

City-State-Zip: MIAMI LAKES FL 33016 City-State-Zip: MIAMI LAKES FL 33016

٧P Title Title **PRESIDENT** Name MARIA. MIGUEL Name GOMEZ. ERIC Address 8140 NW 155 STREET Address 8140 NW 155 STREET

SUITE 101

SUITE 101

Title TREASURER Title DIRECTOR FENNELL, MARCIA PEACH, DIANA Name Name 8140 NW 155 STREET 8140 NW 155 ST Address Address

SUITE 101 SUITE 101

MIAMI LAKES FL 33016 MIAMI LAKES FL 33016 City-State-Zip: City-State-Zip:

Title DIRECTOR Title DIRECTOR

FERNAND, ALEC ZALDUONDO, JESSICA Name Name

Address 8140 NW 155 ST Address 8140 NW 155 ST SUITE 101

SUITE 101

MIAMI LAKES FL 33016 City-State-Zip: MIAMI LAKES FL 33016 City-State-Zip:

Continues on page 2

City-State-Zip:

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: ERIC GOMEZ **PRESIDENT** 03/19/2019

Officer/Director Detail Continued:

Title DIRECTOR

Name GONZALEZ, ALAN

Address 8140 NW 155 ST

SUITE 101

City-State-Zip: MIAMI LAKES FL 33016