

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000632

Entity Name: HOMEOWNERS ASSOCIATION OF SISSON MEADOWS, INC.

FILED
Feb 27, 2014
Secretary of State
CC5794502138

Current Principal Place of Business:

C/O RACHAEL NUTTING
655 BREAKAWAY TRAIL
TITUSVILLE, FL 32780

Current Mailing Address:

P. O. BOX 128
TITUSVILLE, FL 32781

FEI Number: 54-2144812

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MOUNT, KRISTY A
1702 S. WASHINGTON AVE.
TITUSVILLE, FL 32780 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	PD
Name	NUTTING, RACHAEL
Address	C/O RACHAEL NUTTING 655 BREAKAWAY TRAIL
City-State-Zip:	TITUSVILLE FL 32780
Title	SD
Name	STUBBS, HELEN S
Address	463 HOLLOW GLEN DRIVE
City-State-Zip:	TITUSVILLE FL 32780

Title	VPD
Name	DEMEULE, NORMAN
Address	624 BREAKAWAY TRAIL
City-State-Zip:	TITUSVILLE FL 32780
Title	TD
Name	SEARS, AMANDA
Address	645 BREAKAWAY TRAIL
City-State-Zip:	TITUSVILLE FL 32780

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: AMANDA SEARS

TREASURER

02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date