

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000654

Entity Name: SOUTHSORE FALLS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5831 CASCADE FALLS LANE
APOLLO BEACH, FL 33572**Current Mailing Address:**C/O CASTLE GROUP
12270 SW 3RD STREET STE 200
PLANTATION, FL 33325 US**FEI Number:** 03-0539520**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SILBERMAN, AARON
1105 W. SWANN AVENUE
TAMPA, FL 33606 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:** AARON SILBERMAN

04/29/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name GERICH, JOE
Address 5831 CASCADE FALLS LANE
City-State-Zip: APOLLO BEACH FL 33572

Title PRESIDENT
Name SCHMIDT, RICHARD
Address 5831 CASCADE FALLS LANE
City-State-Zip: APOLLO BEACH FL 33572

Title SECRETARY
Name SIMON, TOM
Address 5831 CASCADE FALLS LANE
City-State-Zip: APOLLO BEACH FL 33572

Title TREASURER
Name LOMBARDO, JERRY
Address 5831 CASCADE FALLS LANE
City-State-Zip: APOLLO BEACH FL 33572

Title DIRECTOR
Name SILBERMAN, AARON
Address 5831 CASCADE FALLS LANE
City-State-Zip: APOLLO FL 33573

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: RICHARD SCHMIDT

PRESIDENT

04/29/2023

Electronic Signature of Signing Officer/Director Detail

Date