## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400002068

Entity Name: PALMETTO HOMEOWNERS ASSOCIATION OF BREVARD

COUNTY, INC.

**Current Principal Place of Business:** 

4315 FAY BLVD COCOA, FL 32927

P.O. BOX 1299

**Current Mailing Address:** 

SHARPES, FL 32959 US

FEI Number: 20-0865340 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TCB PROPERTY MANAGEMENT 4315 FAY BLVD COCOA, FL 32927 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

**FILED** Mar 02, 2022

**Secretary of State** 

1587899871CC

## Officer/Director Detail:

Title	DIRECTOR	Title	SECRETARY
Name	HICKERSON, KAREN	Name	DADY, JON

Address 3032 GLENRIDGE DRIVE Address 2702 GLENRIDGE DRIVE City-State-Zip: MERRITT ISLAND FL 32953 City-State-Zip: MERRITT ISLAND FL 32953

Title **TREASURER** Title **PRESIDENT** 

MENDOZA, ELIZABETH Name HRISTO, MARY B Name Address 3073 GLENRIDGE CIRCLE Address 2592 GLENRIDGE CIRCLE City-State-Zip: MERRITT ISLAND FL 32953 City-State-Zip: MERRITT ISLAND FL 32953

Title **DIRECTOR** Title DIRECTOR

Name LUNDY, STEPHEN Name JORDAN, GERALD

Address 2862 GLENRIDGE CIRCLE 3163 GLENRIDGE CIRCLE Address City-State-Zip: MERRITT ISLAND FL 32953 MERRITT ISLAND FL 32953 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.

PD

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: MARY HRISTO

03/02/2022

Date