

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000005005

**FILED**  
**Apr 01, 2021**  
**Secretary of State**  
**8995185467CC**

**Entity Name:** THE BULL RUN UNIT 1 HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

327 OFFICE PLAZA DRIVE SUITE 211  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

P O BOX 12412  
TALLAHASSEE, FL 32317 US

**FEI Number:** 20-1932831

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROWAND, TOM JR.  
327 OFFICE PLAZA DRIVE SUITE 211  
TALLAHASSEE, FL 32301 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:** TOM ROWAND

04/01/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name FEARINGTON, LESLIE  
Address P O BOX 12412  
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR  
Name SIRGEY, JERRY  
Address P O BOX 12412  
City-State-Zip: TALLAHASSEE FL 32317

Title PRESIDENT  
Name ROBINSON, HEATHER  
Address P O BOX 12412  
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR  
Name GOLABEK, DENNIS  
Address P O BOX 12412  
City-State-Zip: TALLAHASSEE FL 32317

Title DIRECTOR  
Name STIMMEL, WILLIAM  
Address P O BOX 12412  
City-State-Zip: TALLAHASSEE FL 32317

Title MANAGEMENT  
Name ROWAND, TOM JR.  
Address P O BOX 12412  
City-State-Zip: TALLAHASSEE FL 32317

*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:** TOM ROWAND JR.

MANAGEMENT

04/01/2021

Electronic Signature of Signing Officer/Director Detail

Date