

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002451

Entity Name: COLONY CLUB HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1 PACKWOOD ROAD NE
WINTER HAVEN, FL 33881**Current Mailing Address:**198 FOUNTAIN WAY
WINTER HAVEN, FL 33881 US**FEI Number:** 52-2454807**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CASHMER, PHILIP M
198 FOUNTAIN WAY
WINTER HAVEN, FL 33881 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:** PHILIP M CASHMER

02/04/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name ROBY, DONALD
Address 29 MORNINGSID RD
City-State-Zip: WINTER HAVEN FL 33881

Title VP
Name MARTIN, BARBARA
Address 6240 CHEESEFACTORY RD
City-State-Zip: MANLIUS NY 13140

Title S
Name LEWIS, MARY A
Address 37 MORNINGSIDE RD
City-State-Zip: WINTER HAVEN FL 33881

Title T
Name CASHMER, PHILIP M
Address 198 FOUNTAIN WAY
City-State-Zip: WINTER HAVEN FL 33881

Title D
Name HETTMANSPERGER, TONI
Address 2547 S. SPORTSMAN DR.
City-State-Zip: WHITE CLOUD MI 49349

Title D
Name CLAYTON, ROBERT
Address 327 NORTHLINE RD.
City-State-Zip: BALLSTON SPA NY 12020

Title DIRECTOR
Name RIVARD, ROBERT
Address 48 MORNINGSIDE RD.
City-State-Zip: WINTER HAVEN FL 33881

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: PHILIP M. CASHMER**TREASURER**

02/04/2015

Electronic Signature of Signing Officer/Director Detail

Date