

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009443

Entity Name: STRAWBERRY FIELDS OF GAINESVILLE HOMEOWNERS ASSOCIATION, INC.

FILED
May 01, 2015
Secretary of State
CC6047016059

Current Principal Place of Business:

C/O MATCHMAKER REALTY OF ALACHUA COUNTY INC
3947 WEST NEWBERRY RD
GAINESVILLE, FL 32607

Current Mailing Address:

C/O MATCHMAKER REALTY OF ALACHUA COUNTY INC
3947 WEST NEWBERRY RD
GAINESVILLE, FL 32607 US

FEI Number: 20-4684615

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATCHMAKER REALTY OF ALACHUA COUNTY INC
MATCHMAKER REALTY OF ALACHUA COUNTY INC
3947 WEST NEWBERRY RD
GAINESVILLE, FL 32607 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: SHARON MUSGROVE

05/01/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name JOEL, REYNOLDS
Address 14177 NW 10TH RD
City-State-Zip: NEWBERRY FL 32669

Title DT
Name DANIEL, SAMPLES
Address 14125 NW 10TH RD
City-State-Zip: NEWBERRY FL 32669

Title DV
Name DAVID, TREADWAY
Address 14291 NW 9TH RD
City-State-Zip: NEWBERRY FL 32669

Title DS
Name PARKYN, DARYL
Address 14110 NW 10TH RD
City-State-Zip: NEWBERRY FL 32669

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: JOEL REYNOLDS

PRESIDENT

05/01/2015

Electronic Signature of Signing Officer/Director Detail

Date