

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

DOCUMENT# N06000001406

Entity Name: SOUTH FORK OF HILLSBOROUGH COUNTY III HOMEOWNERS
ASSOCIATION, INC.

Current Principal Place of Business:

FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR. N. SUITE 100
TAMPA, FL 33716

Current Mailing Address:

FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR. N. SUITE 100
TAMPA, FL 33716 US

FEI Number: 20-4779384

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIRSTSERVICE RESIDENTIAL
FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR. N. SUITE 100
TAMPA, FL 33716 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: MAUREEN CONNOLLY

12/03/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LINVILLE, HEATHER
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR. N. SUITE 100
City-State-Zip: TAMPA FL 33716

Title VP
Name FARRELL, TINA
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR. N. SUITE 100
City-State-Zip: TAMPA FL 33716

Title TREASURER
Name STIP, MELISSA
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR. N. SUITE 100
City-State-Zip: TAMPA FL 33716

Title SECRETARY
Name BROWN-JONES, SUZETTE
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR. N. SUITE 100
City-State-Zip: TAMPA FL 33716

Title DIRECTOR
Name SELL, JOHN
Address FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR. N. SUITE 100
City-State-Zip: TAMPA FL 33716

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: HEATHER LINVILLE

PRESIDENT

12/03/2021

