

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009240

Entity Name: SOUTHCHASE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1631 E VINE ST.
SUITE 300
KISSIMMEE, FL 34744**Current Mailing Address:**1631 E VINE ST.
SUITE 300
KISSIMMEE, FL 34744 US**FEI Number:** 20-5378130**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TITAN HOA MANAGEMENT, LLC
1631 E VINE ST.
SUITE 300
KISSIMMEE, FL 34744 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**Officer/Director Detail :**

Title PRESIDENT
Name KIRKPATRICK, BOBBY
Address 1631 E VINE ST.
 SUITE 300
City-State-Zip: KISSIMMEE FL 34744

Title VP
Name MARPLE, JULIAN
Address 1631 E VINE ST.
 SUITE 300
City-State-Zip: KISSIMMEE FL 34744

Title TREASURER
Name BONACIO, JENNIFER
Address 1631 E VINE ST.
 SUITE 300
City-State-Zip: KISSIMMEE FL 34744

Title SECRETARY
Name MYERS, AMANDA
Address 1631 E VINE STREET
 300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name DELAROSR, VINCENT
Address 1631 E VINE STREET
 300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name EVANS, JOANN
Address 1631 E VINE STREET
 300
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name DYE, MARK
Address 1631 E VINE STREET
 300
City-State-Zip: KISSIMMEE FL 34744

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: BOBBY KIRKPATRICK

PRESIDENT

01/12/2015

Electronic Signature of Signing Officer/Director Detail_____
Date