

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000006579

**Entity Name:** TRIPLE CREEK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

270 W. PLANT STREET STE 340  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

270 W. PLANT STREET STE 340  
WINTER GARDEN, FL 34787 US

**FEI Number: 26-1408474**

**Certificate of Status Desired: No**

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

EVERGREEN LIFESTYLES MANAGEMENT, LLC  
270 W. PLANT STREET STE 340  
WINTER GARDEN, FL 34787 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: RAJVEE KAPADIA**

**04/18/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P/D  
Name MIARS, GRAYDON  
Address 270 W. PLANT STREET STE 340  
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR, VP  
Name NELSON, ROBERT  
Address 270 W. PLANT STREET STE 340  
City-State-Zip: WINTER GARDEN FL 34787

Title D  
Name HESSELBIRG, CINDY  
Address 270 W. PLANT STREET STE 340  
City-State-Zip: WINTER GARDEN FL 34787

Title D  
Name BACHMANN, KEVIN  
Address 270 W. PLANT STREET STE 340  
City-State-Zip: WINTER GARDEN FL 34787

Title SECRETARY, TREASURER  
Name JOHNSON, ELLEN  
Address 270 W. PLANT STREET STE 340  
City-State-Zip: WINTER GARDEN FL 34787

*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: GRAYDON MIARS**

**PRESIDENT**

**04/18/2022**

Electronic Signature of Signing Officer/Director Detail

Date