

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07430

Entity Name: HOLLY FOREST MOBILE HOMEOWNERS ASSOC. INC.**Current Principal Place of Business:**1000 WALKER ST # 999
HOLLY HILL, FL 32117**Current Mailing Address:**1000 WALKER ST #999
HOLLY HILL, FL 32117 US**FEI Number: 59-2496443****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**COOK, LISA
1000 WALKER ST.
LOT # 194
HOLLY HILL, FL 32117 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:** LISA COOK**01/13/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GEOGHEGAN, MARSHALL
Address 1000 WALKER ST., LOT # 58
City-State-Zip: HOLLY HILL FL 32117

Title SECRETARY
Name SAMPICA, JOHN
Address 1000 WALKER ST, LOT # 151
City-State-Zip: HOLLY HILL FL 32117

Title TREASURER, VP
Name HARDER, DAN
Address 1000 WALKER ST., LOT # 276
City-State-Zip: HOLLY HILL, FL 32117

Title DIRECTOR
Name RHOADES, ROBERT
Address 1000 WALKER ST ,LOT#45
City-State-Zip: HOLLY HILL FL 32117

Title ASST. SECRETARY
Name COOK, LISA
Address 1000 WALKER ST,LOT#194
City-State-Zip: HOLLY HILL FL 32117

Title VP
Name ROSS, MIKE
Address 1000 WALKER STREET
 LOT 406
City-State-Zip: HOLLY HILL FL 32117

Title DIRECTOR
Name TOMASI, PAUL
Address 1000 WALKER ST
 LOT #225
City-State-Zip: HOLLY HILL FL 32117

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: JOHN SAMPICA**SECRETARY****01/13/2022**

Electronic Signature of Signing Officer/Director Detail

Date