

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08568

Entity Name: EAGLEBROOK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6302 NESTING CT
TAMPA, FL 33625

Current Mailing Address:

P. O. BOX 340296
TAMPA, FL 33694-0296 US

FEI Number: 59-2542795

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ZIMMERMAN, GLENN
6302 NESTING CT
TAMPA, FL 33625 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: GLENN ZIMMERMAN

02/25/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name ZIMMERMAN, GLENN
Address P. O. BOX 340296
City-State-Zip: TAMPA FL 33694-0296

Title PRESIDENT ELECT, DIRECTOR
Name KELLING, ERIC
Address P. O. BOX 340296
City-State-Zip: TAMPA FL 33694-0296

Title TREASURER, DIRECTOR
Name JEFFRIES, ROBERT
Address P. O. BOX 340296
City-State-Zip: TAMPA FL 33694-0296

Title SECRETARY, DIRECTOR
Name FENNELLY, KATHRYN
Address P. O. BOX 340296
City-State-Zip: TAMPA FL 33694-0296

Title DIRECTOR
Name ASHBAUGH, GARY
Address P. O. BOX 340296
City-State-Zip: TAMPA FL 33694-0296

Title DIRECTOR
Name WEINSTEIN, PAUL
Address P. O. BOX 340296
City-State-Zip: TAMPA FL 33694-0296

Title DIRECTOR
Name JACOBS, MICHELLE
Address P. O. BOX 340296
City-State-Zip: TAMPA FL 33694-0296

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: GLENN ZIMMERMAN

PRESIDENT

02/25/2021

Electronic Signature of Signing Officer/Director Detail

Date