

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08568

**Entity Name:** EAGLEBROOK HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

15104 NIGHTHAWK DRIVE  
TAMPA, FL 33625

**Current Mailing Address:**

15104 NIGHTHAWK DR  
TAMPA, FL 33625 US

**FEI Number:** 59-2542795

**Certificate of Status Desired:** No

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

LEBLANC, WENDY  
15104 NIGHTHAWK DR.  
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:** WENDY LEBLANC

01/10/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name LUCARDIE, FRED  
Address 15123 NIGHTHAWK DR  
City-State-Zip: TAMPA FL 33625

Title SECRETARY  
Name BOTTIS, VERONICA  
Address 6236 EAGLEBROOK AVE  
City-State-Zip: TAMPA FL 33625

Title PRESIDENT  
Name LEBLANC, WENDY  
Address 15102 NIGHTHAWK DR.  
City-State-Zip: TAMPA FL 33625

Title D  
Name MURPHY-LACY, KRIS  
Address 15103 CRAGGY CLIFF ST  
City-State-Zip: TAMPA FL 33625

Title TD  
Name BROOKS, NAOMI  
Address 6237 EAGLEBROOK AVE  
City-State-Zip: TAMPA FL 33625

*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:** NAOMI S. BROOKS

TREASURER

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date