#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08568

Entity Name: EAGLEBROOK HOMEOWNERS' ASSOCIATION, INC.

FILED Feb 16, 2024 Secretary of State 2249259738CC

# **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 02/16/2024

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

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

Title DIRECTOR Title DIRECTOR, PRESIDENT

NameBRUBAKER, THOMASNameDAVIS, WAYNEAddressP. O. BOX 340296AddressP. O. BOX 340296

City-State-Zip: TAMPA FL 33694-0296 City-State-Zip: TAMPA FL 33694-0296

Title DIRECTOR, SECRETARY Title DIRECTOR

NameTADROS, ALEXANDERNameSYKES, THOMASAddressP. O. BOX 340296AddressP. O. BOX 340296

City-State-Zip: TAMPA FL 33694-0296 City-State-Zip: TAMPA FL 33694-0296

Title DIRECTOR

Name KULICK, JOSEPH

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 R ZIMMERMAN TREASURER 02/16/2024

Electronic Signature of Signing Officer/Director Detail

Date