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: DEBORA D PYLE

Electronic Signature of Signing Officer/Director Detail

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: Electronic Signature of Registered Agent

Officer/Director Detail :					
	Title	Р	Title	VP	
	Name	MACALLASTER, SARAH P	Name	HARNESS, ROBERT	
	Address	3215 OAKSTAND LANE	Address	3215 OAKSTAND LANE	
	City-State-Zip:	ORLANDO FL 32812	City-State-Zip:	ORLANDO FL 32812	
	Title	т			
	Name	PYLE, DEBORA			
	Address	1408 MONTCLAIR ROAD			

City-State-Zip: ORLANDO FL 32812

3215 OAKSTAND LANE ORLANDO, FL 32812

Current Mailing Address:

Current Principal Place of Business:

DOCUMENT# N10936

3215 OAKSTAND LANE ORLANDO, FL 32812 US

FEI Number: 59-2451453

Name and Address of Current Registered Agent:

MACALLASTER, SARAH P 3215 OAKSTAND LANE ORLANDO, FL 32812 US

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: BRYN MAWR HOMEOWNERS ASSOCIATION UNIT #5, INC.

FILED Apr 29, 2023 Secretary of State 3515600804CC

Certificate of Status Desired: No

04/29/2023

Date

Date

TREASURER