

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11743

Entity Name: DUNLAWTON HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4645 S CLYDE MORRIS BLVD
SUITE 401
PORT ORANGE, FL 32129

Current Mailing Address:

4645 S CLYDE MORRIS BLVD
SUITE 401
PORT ORANGE, FL 32129 US

FEI Number: 59-2594089

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOMOKA PROPERTY MANAGEMENT, INC
4645 S CLYDE MORRIS BLVD
SUITE 401
PORT ORANGE, FL 32129 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: ANNELI HARTMANN

04/22/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HARTMANN, ANNELI
Address 4645 S CLYDE MORRIS BLVD
 SUITE 401
City-State-Zip: PORT ORANGE FL 32129

Title SECRETARY
Name POWER, TONI
Address 4645 S CLYDE MORRIS BLVD
 SUITE 401
City-State-Zip: PORT ORANGE FL 32129

Title DIRECTOR
Name HORN, VERA
Address 4645 S CLYDE MORRIS BLVD
 SUITE 401
City-State-Zip: PORT ORANGE FL 32129

Title DIRECTOR
Name WHEATON, WALLACE
Address 4645 S CLYDE MORRIS BLVD
 SUITE 401
City-State-Zip: PORT ORANGE FL 32129

Title VP
Name CORIGLIANO, CHARLES
Address 4645 S CLYDE MORRIS BLVD
 SUITE 401
City-State-Zip: PORT ORANGE FL 32129

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: ANNELI HARTMANN

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04/22/2025

Electronic Signature of Signing Officer/Director Detail

Date