

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000005705

Entity Name: FISHHAWK RANCH WEST HOMEOWNERS ASSOCIATION, INC.

FILED
Feb 14, 2024
Secretary of State
3965160774CC

Current Principal Place of Business:

FISHHAWK RANCH WEST HOMEOWNERS ASSOCIATION INC
6001 VILLAGE CENTER DRIVE
LITHIA, FL 33547

Current Mailing Address:

FISHHAWK RANCH WEST HOMEOWNERS ASSOCIATION INC
6001 VILLAGE CENTER DRIVE
LITHIA, FL 33547 US

FEI Number: 32-0417272

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FISHHAWK RANCH WEST HOMEOWNERS ASSOCIATION INC
FISHHAWK RANCH WEST HOMEOWNERS ASSOCIATION INC
6001 VILLAGE CENTER DRIVE
LITHIA, FL 33547 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: SHAWN ROWLAND

02/14/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name ROSENTHAL, MARK
Address FISHHAWK RANCH WEST
 HOMEOWNERS ASSOCIATION INC
 6001 VILLAGE CENTER DRIVE
City-State-Zip: LITHIA FL 33547

Title DIRECTOR
Name MCMAHON, MICHAEL
Address FISHHAWK RANCH WEST
 HOMEOWNERS ASSOCIATION INC
 6001 VILLAGE CENTER DRIVE
City-State-Zip: LITHIA FL 33547

Title SECRETARY
Name LOVINGGOOD, JOHN
Address FISHHAWK RANCH WEST
 HOMEOWNERS ASSOCIATION INC
 6001 VILLAGE CENTER DRIVE
City-State-Zip: LITHIA FL 33547

Title TREASURER
Name VANLANDINGHAM, REBECCA
Address FISHHAWK RANCH WEST
 HOMEOWNERS ASSOCIATION INC
 6001 VILLAGE CENTER DRIVE
City-State-Zip: LITHIA FL 33547

Title DIRECTOR
Name DEPEW, JASON
Address FISHHAWK RANCH WEST
 HOMEOWNERS ASSOCIATION INC
 6001 VILLAGE CENTER DRIVE
City-State-Zip: LITHIA FL 33547

Title DIRECTOR
Name SCHMIDT, KEVIN
Address FISHHAWK RANCH WEST
 HOMEOWNERS ASSOCIATION INC
 6001 VILLAGE CENTER DRIVE
City-State-Zip: LITHIA FL 33547

Title VP
Name DUCOTE, APRIL
Address FISHHAWK RANCH WEST
 HOMEOWNERS ASSOCIATION INC
 6001 VILLAGE CENTER DRIVE
City-State-Zip: LITHIA FL 33547

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: REBECCA VANLANDINGHAM

TREASURER

02/14/2024

