2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N13000005705

Entity Name: FISHHAWK RANCH WEST HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 03, 2022
Secretary of State
0808860258CC

Current Principal Place of Business:

C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104 ST. PETERSBURG, FL 33702

Current Mailing Address:

C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104 ST. PETERSBURG, FL 33702 US

FEI Number: 32-0417272 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 104 ST. PETERSBURG, FL 33702 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: JOHN HENSLEY 03/03/2022

Electronic Signature of Registered Agent

Officer/Director Detail :

Title SECRETARY Title PRESIDENT

Name WELLS, JOHANAN Name KRZESINSKI, THOMAS

Address C/O ASSOCIA GULF COAST Address C/O ASSOCIA GULF COAST

9887 4TH STREET NORTH SUITE 104 9887 4TH STREET NORTH SUITE 104

City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702

Title VP Title DIRECTOR

Name ROSENTHAL, MARK Name MCMAHON, MICHAEL

Address C/O ASSOCIA GULF COAST Address C/O ASSOCIA GULF COAST

9887 4TH STREET NORTH SUITE 104 9887 4TH STREET NORTH SUITE 104

City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR Title DIRECTOR

Name DEAR, JOHN Name MERCER, KATHY

Address C/O ASSOCIA GULF COAST Address C/O ASSOCIA GULF COAST

9887 4TH STREET NORTH SUITE 104 9887 4TH STREET NORTH SUITE 104

City-State-Zip: ST. PETERSBURG FL 33702 City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR

Name JAMROZIK, WILLIAM

Address C/O ASSOCIA GULF COAST

9887 4TH STREET NORTH SUITE 104

City-State-Zip: ST. PETERSBURG FL 33702

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: THOMAS KRZESINSKI PRESIDENT 03/03/2022

Date