2900 GLADES WESTON, FL	CIRCLE, STE 1050 33327			
Current Ma	iling Address:			
	ES CIRCLE, STE 1050 FL 33327 US			
FEI Number: 38-3989760			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
BACKER ABOUD POLIAKOFF & FOELSTER 400 SOUTH DIXIE HWY STE. 420 BOCA RATON, FL 33432 US				
The above name	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Florida	
	d entity submits this statement for the purpose of changing its regis E: RYAN POLIAKOFF	stered office or regis		4/11/2023
		stered office or regis		
SIGNATUR	E: RYAN POLIAKOFF	stered office or regis		4/11/2023
SIGNATUR	E: RYAN POLIAKOFF Electronic Signature of Registered Agent	stered office or regis		4/11/2023
SIGNATUR Officer/Dire	E: RYAN POLIAKOFF Electronic Signature of Registered Agent		0	4/11/2023
SIGNATUR Officer/Dire	E: RYAN POLIAKOFF Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	0 VP	4/11/2023
SIGNATUR Officer/Dire Title Name	E: RYAN POLIAKOFF Electronic Signature of Registered Agent Ctor Detail : PRESIDENT RIPPES, ALFREDO 2900 GLADES CIRCLE, STE 1050	Title Name Address	VP GAVENAS, JOHN	4/11/2023
SIGNATUR Officer/Dire Title Name Address	E: RYAN POLIAKOFF Electronic Signature of Registered Agent Ctor Detail : PRESIDENT RIPPES, ALFREDO 2900 GLADES CIRCLE, STE 1050	Title Name Address	0 VP GAVENAS, JOHN 2900 GLADES CIRCLE, STE 1050	4/11/2023
SIGNATUR Officer/Dire Title Name Address City-State-Zip: Title	E: RYAN POLIAKOFF Electronic Signature of Registered Agent Concord Detail : PRESIDENT RIPPES, ALFREDO 2900 GLADES CIRCLE, STE 1050 WESTON FL 33327 SECRETARY	Title Name Address	0 VP GAVENAS, JOHN 2900 GLADES CIRCLE, STE 1050	4/11/2023

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: ALFREDO RIPPES

PRESIDENT

04/11/2023

Electronic Signature of Signing Officer/Director Detail

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000004986

Entity Name: THE PRESERVE AT EMERALD HILLS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

FILED Apr 11, 2023 Secretary of State 4288483392CC

Date