

2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N15227

Entity Name: HOME OWNERS ASSOCIATION SAN MATEO VILLAGE INC.

Current Principal Place of Business:

5205 SISSON ROAD
TITUSVILLE, FL 32780

Current Mailing Address:

5205 SISSON ROAD
TITUSVILLE, FL 32780 US

FEI Number: 59-2719592

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE RUGGIERI LAW FIRM P.A.
111 NORTH ORANGE AVENUE
SUITE 725
ORLANDO, FL 32801 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: LORNA GHIOTO

02/07/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PATRON, RANDY
Address 355 SAN MATEO BLVD
City-State-Zip: TITUSVILLE FL 32780

Title 1ST VICE PRESIDENT
Name CLOUGH, NANCY
Address 328 SAN BERNARDO DRIVE
City-State-Zip: TITUSVILLE FL 32780

Title 2ND VICE PRESIDENT
Name WETZEL, MARTA
Address 358 SANTA ROBERTO DRIVE
City-State-Zip: TITUSVILLE FL 32780

Title SECRETARY
Name PATRON, DIANE
Address 355 SAN MATEO BLVD
City-State-Zip: TITUSVILLE FL 32780

Title TREASURER
Name GHIOTO, LORNA
Address 343 SAN ROBERTO DRIVE
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name SCHREIER, ALLEN
Address 320 SAN MATEO BLVD
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name AYRES, TIM
Address 5015 SANTA BARBARA AVE
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name AUSTIN, LINDA
Address 5002 SANTA ANNA AVE
City-State-Zip: TITUSVILLE FL 32780

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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: LORNA GHIOTO

TREASURER HOASMV

02/07/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name TACONE, HELEN
Address 5006 SANTA ANNA AVE
City-State-Zip: TITUSVILLE FL 32780