

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18513

**FILED**  
**Feb 17, 2017**  
**Secretary of State**  
**CC6790501683**

**Entity Name:** "THE FARMS" HOME OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4145 EQUESTRIAN LN  
WINDERMERE, FL 34786

**Current Mailing Address:**

1554 BOREN DRIVE  
SUTIE 300  
OCOEE, FL 34761 US

**FEI Number:** 59-3016941

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MACHUGA, CAROL J  
1554 BOREN DR  
300  
OCOEE, FL 34761 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name WEBB, JEROME WILLIAM  
Address 4137 EQUESTRIAN LANE  
City-State-Zip: WINDERMERE FL 34786

Title VP  
Name GRACEY, DANIEL  
Address 4145 EQUESTRIAN LANE  
City-State-Zip: WINDERMERE FL 34786

Title SD  
Name MACHUGA, CAROL J  
Address 1554 BOREN DR  
SUITE 300  
City-State-Zip: OCOEE FL 34761

Title DAL  
Name GREENBURG, MARK  
Address 4138 EQUESTRIAN LANE  
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR  
Name WEBB, HEATHER IONA  
Address 4137 EQUESTRIAN LANE  
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR  
Name LEWIS, SARAH J  
Address 4122 EQUESTRIAN LANE  
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR  
Name MACHUGA, MARK T DR  
Address 1554 BOREN DR  
SUITE 300  
City-State-Zip: OCOEE FL 34761

*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:** CAROL J MACHUGA

**SD**

**02/17/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date