

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N19000008640

**Entity Name:** CRESSWIND LAKEWOOD RANCH HOMEOWNERS ASSOCIATION, INC

**Current Principal Place of Business:**

270 W. PLANT STREET #340  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

270 W. PLANT STREET #340  
WINTER GARDEN, FL 34787 US

**FEI Number: 84-3112416**

**Certificate of Status Desired: No**

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

EVERGREEN LIFESTYLES MANAGEMENT, LLC  
270 W. PLANT STREET #340  
WINTER GARDEN, FL 34787 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: RAJVEE KAPADIA**

**11/15/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            TUCKER, RODNEY  
Address        270 W. PLANT STREET #340  
City-State-Zip: WINTER GARDEN FL 34787

Title            VP, DIRECTOR  
Name            MARTIN, PAUL  
Address        270 W. PLANT STREET #340  
City-State-Zip: WINTER GARDEN FL 34787

Title            TREASURER, DIRECTOR  
Name            SWIERZKO, KAITLYN  
Address        270 W. PLANT STREET #340  
City-State-Zip: WINTER GARDEN FL 34787

Title            DIRECTOR, SECRETARY  
Name            KATTOURA, RICH  
Address        270 W. PLANT STREET #340  
City-State-Zip: WINTER GARDEN FL 34787

Title            TRUSTEE  
Name            MORTON, SCOTT  
Address        270 W. PLANT STREET #340  
City-State-Zip: WINTER GARDEN FL 34787

Title            VICE SECRETARY  
Name            BINES, MARK  
Address        270 W. PLANT STREET #340  
City-State-Zip: WINTER GARDEN FL 34787

*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: RODNEY TUCKER**

**PRESIDENT**

**11/15/2021**

Electronic Signature of Signing Officer/Director Detail

Date