

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20067

Entity Name: SUN VALLEY HOMEOWNERS ASSOCIATION, INC.

FILED
Feb 02, 2023
Secretary of State
3816350987CC

Current Principal Place of Business:

C/O CAROLINA MANAGEMENT SERVICES
6778 LANTANA ROAD SUITE 9
LAKE WORTH, FL 33467

Current Mailing Address:

C/O CAROLINA MANAGEMENT SERVICES, INC.
P.O. BOX 740425
BOYNTON BEACH, FL 33474 US

FEI Number: 59-2813606

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAYE BENDER REMBAUM, P.L.
C/O MICHAEL S. BENDER, ESQ.
1200 PARK CENTRAL BLVD SOUTH
POMPANO BEACH, FL 33064 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: MICHAEL S. BENDER, ESQ.

02/02/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PIAZZA, VINCENT
Address C/O CAROLINA MANAGEMENT SERVICES
6778 LANTANA ROAD SUITE 9
City-State-Zip: LAKE WORTH FL 33467

Title PRESIDENT
Name VESCOVI, ROBYN
Address C/O CAROLINA MANAGEMENT SERVICES
6778 LANTANA ROAD SUITE 9
City-State-Zip: LAKE WORTH FL 33467

Title TREASURER
Name GELPI, AMANDA
Address C/O CAROLINA MANAGEMENT SERVICES
6778 LANTANA ROAD SUITE 9
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name SCOTTO, CHRISTOPHER
Address C/O CAROLINA MANAGEMENT SERVICES
6778 LANTANA ROAD SUITE 9
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name PERRY, SUE
Address C/O CAROLINA MANAGEMENT SERVICES
6778 LANTANA ROAD SUITE 9
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name LIBRIZZI, MARIO
Address C/O CAROLINA MANAGEMENT SERVICES
6778 LANTANA ROAD SUITE 9
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name ALBANO, SCOTT
Address C/O CAROLINA MANAGEMENT SERVICES
6778 LANTANA ROAD SUITE 9
City-State-Zip: LAKE WORTH FL 33467

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: ROBYN VESCOVI

PRESIDENT

02/02/2023

