

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000008428

**Entity Name:** FLINT ROCK AGRIHOOD HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**10000 SW 52ND AVE - THE LINKS CLUBHOUSE  
GAINESVILLE, FL 32608**Current Mailing Address:**10000 SW 52ND AVE - THE LINKS CLUBHOUSE  
GAINESVILLE, FL 32608 US**FEI Number:** 87-2553390**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUARDIAN ASSOCIATION MANAGEMENT, LLC  
10000 SW 52ND AVE - THE LINKS CLUBHOUSE  
GAINESVILLE, FL 32608 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:** KELLY BURCH

03/21/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |   |
|-----------------|---|
| Title           | P                                       |
| Name            | BEAUCHAMP, TARA                         |
| Address         | 10000 SW 52ND AVE - THE LINKS CLUBHOUSE |
| City-State-Zip: | GAINESVILLE FL 32608                    |

|                 |   |
|-----------------|---|
| Title           | S                                       |
| Name            | REED, TYMBER                            |
| Address         | 10000 SW 52ND AVE - THE LINKS CLUBHOUSE |
| City-State-Zip: | GAINESVILLE FL 32608                    |

|                 |   |
|-----------------|---|
| Title           | VP                                      |
| Name            | DEAS, MARILYN                           |
| Address         | 10000 SW 52ND AVE - THE LINKS CLUBHOUSE |
| City-State-Zip: | GAINESVILLE FL 32608                    |

|                 |   |
|-----------------|---|
| Title           | T                                       |
| Name            | PARAS, AMY                              |
| Address         | 10000 SW 52ND AVE - THE LINKS CLUBHOUSE |
| City-State-Zip: | GAINESVILLE FL 32608                    |

*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:** TARA BEAUCHAMP**PRESIDENT**

03/21/2023

Electronic Signature of Signing Officer/Director Detail

Date