2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23748

Entity Name: SYLVAN POND HOMEOWNERS' ASSOCIATION, INC.

FILED
Jan 26, 2024
Secretary of State
3794447061CC

Current Principal Place of Business:

4901 VINELAND RD, SUITE 455 ORLANDO. FL 32811

Current Mailing Address:

4901 VINELAND RD, SUITE 455 ORLANDO, FL 32811 US

FEI Number: 59-2933838 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA-COMMUNITY MANAGEMENT PROFESSIONALS 4901 VINELAND RD, SUITE 455 ORLANDO, FL 32811 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: GABRIELA JAKOBSEN 01/26/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP Title PRESIDENT

Name MAZUR, JAMES D. Name HOUSER, SANDRA A.

Address 4901 VINELAND RD, SUITE 455 Address 4901 VINELAND RD, SUITE 455

City-State-Zip: ORLANDO FL 32811 City-State-Zip: ORLANDO FL 32811

Title TREASURER Title SECRETARY

Name VONWERDER, JULI A. Name CAMPBELL, KRISTINE S.

Address 4901 VINELAND RD, SUITE 455 Address 4901 VINELAND RD, SUITE 455

City-State-Zip: ORLANDO FL 32811 City-State-Zip: ORLANDO FL 32811

Title DIRECTOR Title DIRECTOR

Name RIVERA RUIZ. CARLOS ROBERTO Name FOUNTAIN, JAMES

Address 4901 VINELAND RD, SUITE 455 Address 4901 VINELAND RD, SUITE 455

City-State-Zip: ORLANDO FL 32811 City-State-Zip: ORLANDO FL 32811

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: SANDRA HOUSER PRESIDENT 01/26/2024