

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24766

Entity Name: GEORGIANA SETTLEMENT HOMEOWNERS' ASSOC., INC.**Current Principal Place of Business:**1090 OLD PARSONAGE DR
MERRITT ISLAND, FL 32952**Current Mailing Address:**1090 OLD PARSONAGE DR
MERRITT ISLAND, FL 32952 US**FEI Number: 59-2947948****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JOHN L. SOILEAU
3490 NORTH US HIGHWAY 1
COCOA, FL 32926 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	TREASURER
Name	VAN HOOSE, JERRI
Address	1230 OLD PARSONAGE DR
City-State-Zip:	MERRITT ISLAND FL 32952

Title	PRESIDENT
Name	MAHANY, WALTER
Address	1090 OLD PARSONAGE DRIVE
City-State-Zip:	MERRITT ISLAND FL 32952

Title	OFFICER
Name	SEBESTA, STEVE
Address	1060 OLD PARSONAGE DRIVE
City-State-Zip:	MERRITT ISLAND FL 32952

Title	OFFICER
Name	BULLOCH, STEPHEN
Address	1010 OLD PARSONAGE DR
City-State-Zip:	MERRITT ISLAND FL 32952

Title	OFFICER
Name	JOHNSON, DON
Address	1185 OLD PARSONAGE DRIVE
City-State-Zip:	MERRITT ISLAND FL

Title	SECRETARY
Name	WESTER, COLLEEN
Address	1205 OLD PARSONAGE DR
City-State-Zip:	MERRITT ISLAND FL 32952

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: JERRI J VAN HOOSE**TREASURER****04/10/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date