

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24885

Entity Name: ALMOND TREE ESTATES HOMEOWNER'S ASSOCIATION, INC**FILED**
May 03, 2022
Secretary of State
0810164681CC**Current Principal Place of Business:**C/O BEACON COMMUNITY MANAGEMENT
9100 CONROY WINDERMERE RD STE 200 SUITE # 200
WINDERMERE, FL 34786**Current Mailing Address:**C/O BEACON COMMUNITY MANAGEMENT
9100 CONROY WINDERMERE RD STE 200 SUITE # 200
WINDERMERE, FL 34786 US**FEI Number:** 59-2874139**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BEACON COMMUNITY MANAGEMENT
C/O BEACON COMMUNITY MANAGEMENT
9100 CONROY WINDERMERE RD STE 200
WINDERMERE, FL 34786 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:** SCOTT ST CLAIR**05/03/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name WHALE, MICHELLE
Address C/O BEACON COMMUNITY
MANAGEMENT
9100 CONROY WINDERMERE RD STE
200
City-State-Zip: WINDERMERE FL 34786

Title PRESIDENT
Name LOCKARD, MARK
Address C/O BEACON COMMUNITY
MANAGEMENT
9100 CONROY WINDERMERE RD STE
200
City-State-Zip: WINDEREMERE FL 34786

Title VP
Name RODIER, BART
Address C/O BEACON COMMUNITY
MANAGEMENT
9100 CONROY WINDERMERE RD STE
200
City-State-Zip: WINDEREMERE FL 34786

Title TREASURER
Name WALKER, PAUL
Address C/O BEACON COMMUNITY
MANAGEMENT
9100 CONROY WINDERMERE RD STE
200
City-State-Zip: WINDEREMERE FL 34786

Title DIRECTOR
Name BROWN, BRUCE
Address C/O BEACON COMMUNITY
MANAGEMENT
9100 CONROY WINDERMERE RD STE
200
City-State-Zip: WINDEREMERE FL 34786

Title DIRECTOR
Name WEAVER, BOB
Address C/O BEACON COMMUNITY
MANAGEMENT
9100 CONROY WINDERMERE RD STE
200
City-State-Zip: WINDEREMERE FL 34786

Title DIRECTOR
Name PARMENTER, JOHN
Address C/O BEACON COMMUNITY
MANAGEMENT
9100 CONROY WINDERMERE RD STE
200
City-State-Zip: WINDEREMERE FL 34786

Title MANAGER / AGENT
Name ST. CLAIR, SCOTT
Address C/O BEACON COMMUNITY
MANAGEMENT
9100 CONROY WINDERMERE RD STE
200
City-State-Zip: WINDEREMERE FL 34786

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, the name 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: SCOTT ST. CLAIR

MANAGER

05/03/2022

Electronic Signature of Signing Officer/Director Detail

Date