2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26894

Entity Name: EASTWOOD COMMUNITY ASSOCIATION, INC.

FILED
Jan 27, 2022
Secretary of State
0637360687CC

Current Principal Place of Business:

2113 RUBY RED BLVD.

SUITE B

CLERMONT, FL 34714

Current Mailing Address:

EASTWOOD COMMUNITY ASSOCIATION 150 CAVAN LANE ORLANDO, FL 32828 US

FEI Number: 59-2969691 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EXTREME MANAGEMENT TEAM 2113 RUBY RED BLVD. SUITE B

CLERMONT, FL 34714 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: KATHY OLDRO 01/27/2022

Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

City-State-Zip:

Address

ORLANDO FL 32828

Title SECRETARY Title DIRECTOR

Name VISI, CARIANNE Name SCHUMACHER, BRIAN

Address EASTWOOD COMMUNITY Address EASTWOOD COMMUNITY

ASSOCIATION ASSOCIATION 150 CAVAN LANE 150 CAVAN LANE

150 CAVAN LANE

ORLANDO FL 32828

City-State-Zip: ORLANDO FL 32828

Title TREASURER Title DIRECTOR

Name KAUFMAN, AARON Name COLE, TIMOTHY

Address EASTWOOD COMMUNITY Address EASTWOOD COMMUNITY

ASSOCIATION ASSOCIATION
150 CAVAN LANE 150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828 City-State-Zip: ORLANDO FL 32828

Title DIRECTOR Title DIRECTOR

Name DAVIS, SHELLEY Name SUMNER, RICHARD

Address EASTWOOD COMMUNITY Address EASTWOOD COMMUNITY

ASSOCIATION ASSOCIATION

150 CAVAN LANE 150 CAVAN LANE

Title PRESIDENT Title DIRECTOR

Name MCCALL, JEFFREY Name WALLS, KEITH

EASTWOOD COMMUNITY Address EASTWOOD COMMUNITY

ASSOCIATION ASSOCIATION 150 CAVAN LANE 150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828 City-State-Zip: ORLANDO FL 32828

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ORLANDO FL 32828

City-State-Zip:

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: JEFFREY MCCALL PRESIDENT 01/27/2022

Officer/Director Detail Continued:

GONDER, SARAH

Name

Title Title DIRECTOR

Name EMERSON, NOAH Name CONNORS BODKIN, ERIN

EASTWOOD COMMUNITY ASSOCIATION EASTWOOD COMMUNITY Address Address

150 CAVAN LANE **ASSOCIATION** 150 CAVAN LANE

City-State-Zip: ORLANDO FL 32828 City-State-Zip: ORLANDO FL 32828

DIRECTOR Title Title **DIRECTOR**

TUCKER, ERNEST Name Address EASTWOOD COMMUNITY ASSOCIATION

150 CAVAN LANE Address **EASTWOOD COMMUNITY**

ASSOCIATION

ORLANDO FL 32828 City-State-Zip: 150 CAVAN LANE

ORLA NDO FL 32828 City-State-Zip: