

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28853

FILED
Jan 18, 2020
Secretary of State
1658701844CC

Entity Name: HOMEPORT HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4400 BAYOU BLVD
#58
PENSACOLA, FL 32503

Current Mailing Address:

4400 BAYOU BLVD
#58
PENSACOLA, FL 32503 US

FEI Number: 59-3248374

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REALTY MASTERS OF FLORIDA
4400 BAYOU BLVD
#58
PENSACOLA, FL 32503 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: RENEE WIND

01/18/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name NEWGENT, MATT
Address 4400 BAYOU BLVD
 #58
City-State-Zip: PENSACOLA FL 32503

Title VP
Name VATTER, TOM
Address 4400 BAYOU BLVD
 #58
City-State-Zip: PENSACOLA FL 32503

Title TREASURER
Name JOHNSON, MARK
Address 4400 BAYOU BLVD
 #58
City-State-Zip: PENSACOLA FL 32503

Title SECRETARY
Name ADAMS, KAREN
Address 4400 BAYOU BLVD
 #58
City-State-Zip: PENSACOLA FL 32503

Title DIRECTOR
Name BRAUNER, CHRIS
Address 4400 BAYOU BLVD
 #58
City-State-Zip: PENSACOLA FL 32503

Title DIRECTOR
Name HARRISON, RICK
Address 4400 BAYOU BLVD
 #58
City-State-Zip: PENSACOLA FL 32503

Title DIRECTOR
Name HOFFMAN, LARRY
Address 4400 BAYOU BLVD
 #58
City-State-Zip: PENSACOLA FL 32503

Title OTHER, MANAGER
Name WIND, RENEE
Address 4400 BAYOU BLVD
 #58
City-State-Zip: PENSACOLA FL 32503

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: RENEE WIND

MANAGER

01/18/2020

Electronic Signature of Signing Officer/Director Detail

Date