## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30586

Entity Name: ABERDEEN HOMEOWNERS ASSOCIATION, INC.

FILED Apr 25, 2018 Secretary of State CC9747630216

## **Current Principal Place of Business:**

720 BROOKER CREEK BLVD

SUITE 206

OLDSMAR, FL 34677

## **Current Mailing Address:**

720 BROOKER CREEK BLVD

SUITE 206

OLDSMAR, FL 34677 US

FEI Number: 59-2931740 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SCANNAVINO INC 720 BROOKER CREEK BLVD. SUITE 206

OLDSMAR, FL 34677 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title VI

Name REILLY, DAVE Name DRAKE, DEBORAH

Address 720 BROOKER CREEK BLVD Address 720 BROOKER CREEK BLVD. #206 SUITE 206

OLDSMAR FL 34677

City-State-Zip: OLDSMAR FL 34677

Title TR

Title SC

Name PICKER, JACK

Address 720 BROOKER CREEK BLVD Address 720 BROOKER CREEK BLVD SUITE 206

SUITE 206

City-State-Zip: OLDSMAR FL 34677

Title D

Name PHILLIPS, DAVE Name HORNUNG, ANTHONY

Address 720 BROOKER CREEK BLVD Address 720 BROOKER CREEK BLVD SUITE 206

SUITE 206

City-State-Zip: OLDSMAR FL 34677

Title D

Name TAWFIK, BAHA

Address 720 BROOKER CREEK BLVD

206

City-State-Zip: OLDSMAR FL 34677

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: DAVE REILLY PRESIDENT 04/25/2018