

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31818

**Entity Name:** HOMEOWNERS' ASSOCIATION OF EAGLE'S NEST, INC.

**Current Principal Place of Business:**

05519 EAGLE'S NEST RD  
FRUITLAND PARK, FL 34731

**Current Mailing Address:**

05519 EAGLE'S NEST RD  
FRUITLAND PARK, FL 34731 US

**FEI Number:** 59-2945946

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DUGGAN, J ROBERT  
1029 W MAGNOLIA  
LEESBURG, FL 34748 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 PRES  
Name NUNLEY, RANDY  
Address 05505 SPECKLE PERCH LN  
City-State-Zip: FRUITLAND PARK FL 34731

Title VP  
Name BROWN, JOHN  
Address 05450 SPECKLE PERCH LN  
City-State-Zip: FRUITLAND PARK FL 34731

Title T  
Name BRAUN, MARY  
Address 05508 OSPREY LANE  
City-State-Zip: FRUITLAND PARK FL 34731

Title D  
Name RAIZOR, JULE  
Address 05504 BIG BASS LANE  
City-State-Zip: FRUITLAND PARK FL 34731

Title S  
Name GRIFFIN, PATTI  
Address 05530 EAGLES NEST RD  
City-State-Zip: FRUITLAND PARK FL 34731

Title D  
Name COWDEN, CAROLYN  
Address 05540 EAGLES NEST RD  
City-State-Zip: FRUITLAND PARK FL 34731

Title DIRECTOR  
Name WICKLINE, SUSAN  
Address 05447 OSPREY LANE  
City-State-Zip: FRUITLAND PARK FL 34731

Title DIRECTOR  
Name PUMPHREY, RHONDA  
Address 05507 SUNSET DR  
City-State-Zip: FRUITLAND PARK FL 34731

**Continues on page 2**

*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:** PATTI GRIFFIN

**SECRETARY**

**03/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            RAIZOR, JULE  
Address        05504 BIG BASS LANE  
City-State-Zip: FRUITLAND PARK FL 34731