2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34207

Entity Name: HONEYBROOK PLANTATION HOMEOWNERS ASSOCIATION,

INC.

FILED
Mar 26, 2020
Secretary of State
8993252251CC

Current Principal Place of Business:

928 E. NEW HAVEN AVE. MELBOURNE, FL 32901

Current Mailing Address:

928 E. NEW HAVEN AVE. MELBOURNE, FL 32901 US

FEI Number: 59-2997276 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPACE COAST PROPERTY MANAGEMENT OF BREVARD 928 E. NEW HAVEN AVE.
MELBOURNE, FL 32901 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 TREASURER Title DAL

Name THIBODEAU, BOB Name FAIRMAN, BRAD

Address 928 E. NEW HAVEN AVE. Address 928 E. NEW HAVEN AVE.

City-State-Zip: MELBOURNE FL 32901 City-State-Zip: MELBOURNE FL 32901

Title SECRETARY Title DAL

Name BRIZENDINE, DEBBIE Name VENZEN, OSWALD

Address 928 E. NEW HAVEN AVE. Address 928 E. NEW HAVEN AVE.

City-State-Zip: MELBOURNE FL 32901 City-State-Zip: MELBOURNE FL 32901

Title DAL Title DAL

Name DUGAN, JACK Name SLYTER, VALERIE

Address 928 E. NEW HAVEN AVE. Address 928 E. NEW HAVEN AVE.

City-State-Zip: MELBOURNE FL 32901 City-State-Zip: MELBOURNE FL 32901

Title PRESIDENT Title VP

Name VITA, JIM Name ROSA, PHIL

Address 928 E. NEW HAVEN AVE. Address 928 E. NEW HAVEN AVE.

City-State-Zip: MELBOURNE FL 32901 City-State-Zip: MELBOURNE FL 32901

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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: BOB THIBODEAU TREASURER 03/26/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

TitleSECRETARYTitleDIRECTORNameVITA, DIANNENameMORGAN, KEN

Address 928 E. NEW HAVEN AVE. Address 928 E. NEW HAVEN AVE.

City-State-Zip: MELBOURNE FL 32901 City-State-Zip: MELBOURNE FL 32901