

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34207

Entity Name: HONEYBROOK PLANTATION HOMEOWNERS ASSOCIATION, INC.**FILED**
Apr 07, 2022
Secretary of State
4996535008CC**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	DIRECTOR
Name	THIBODEAU, BOB
Address	928 E. NEW HAVEN AVE.
City-State-Zip:	MELBOURNE FL 32901

Title	DAL
Name	BRIZENDINE, DEBBIE
Address	928 E. NEW HAVEN AVE.
City-State-Zip:	MELBOURNE FL 32901

Title	DAL
Name	DUGAN, JACK
Address	928 E. NEW HAVEN AVE.
City-State-Zip:	MELBOURNE FL 32901

Title	PRESIDENT
Name	VITA, JIM
Address	928 E. NEW HAVEN AVE.
City-State-Zip:	MELBOURNE FL 32901

Title	VP
Name	ROSA, PHIL
Address	928 E. NEW HAVEN AVE.
City-State-Zip:	MELBOURNE FL 32901

Title	DAL
Name	SCHIFLETT, KIM
Address	928 E. NEW HAVEN AVE.
City-State-Zip:	MELBOURNE FL 32901

Title	DAL
Name	FERCH, DAVID
Address	928 E. NEW HAVEN AVE.
City-State-Zip:	MELBOURNE FL 32901

Title	TREASURER
Name	WHITING, DELBERT
Address	928 E. NEW HAVEN AVE.
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: DELBERT WHITING**TREASURER****04/07/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FAIRMAN, BRAD
Address	928 E. NEW HAVEN AVE.
City-State-Zip:	MELBOURNE FL 32901