

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34212

Entity Name: GREENHAVEN UNIT THREE ASSOCIATION, INC.**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**FEI Number:** 59-3018523**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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name CULBRETH, KAREN
Address 720 BROOKER CREEK BLVD.
SUITE 206
City-State-Zip: OLDSMAR FL 34677

Title D
Name KNOWLES, LYNNE
Address 720 BROOKER CREEK BLVD.
SUITE 206
City-State-Zip: OLDSMAR FL 34677

Title STD
Name BECKLUND, VICTOR
Address 720 BROOKER CREEK BLVD.
SUITE 206
City-State-Zip: OLDSMAR FL 34677

Title VD
Name GLAZER, IRWIN
Address 720 BROOKER CREEK BLVD. #206
City-State-Zip: OLDSMAR FL 34677

Title D
Name EDWARDS, DONALD
Address 720 BROOKER CREEK BLVD. #206
City-State-Zip: OLDSMAR FL 34677

Title D
Name TAYLOR, LYNDA
Address 720 BROOKER CREEK BLVD.
SUITE 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: KAREN CULBRETH**PRESIDENT****03/08/2016**

Electronic Signature of Signing Officer/Director Detail

Date