

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37992

Entity Name: CARLISLE CLUB HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**905 E. MARTIN LUTHER KING JR. DRIVE
STE 310
TARPON SPRINGS, FL 34689**Current Mailing Address:**905 E. MARTIN LUTHER KING JR. DRIVE
STE 310
TARPON SPRINGS, FL 34689 US**FEI Number:** 59-3697610**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RANALLO, JAMES J
905 E. MARTIN LUTHER KING JR. DRIVE
STE 310
TARPON SPRINGS, FL 34689 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	PRESIDENT, DIRECTOR
Name	DESMARIAS, JOSEPH
Address	905 E. MARTIN LUTHER KING JR. DRIVE STE 310
City-State-Zip:	TARPON SPRINGS FL 34689

Title	VP, DIRECTOR
Name	SMITH, BUD
Address	905 E. MARTIN LUTHER KING JR. DRIVE STE 310
City-State-Zip:	TARPON SPRINGS FL 34689

Title	SECRETARY, DIRECTOR, TREASURER
Name	HORNSBY, BARBARA
Address	905 E. MARTIN LUTHER KING JR. DRIVE STE 310
City-State-Zip:	TARPON SPRINGS FL 34689

Title	DIRECTOR
Name	LEIGH, SHARON
Address	905 E. MARTIN LUTHER KING JR. DRIVE STE 310
City-State-Zip:	TARPON SPRINGS FL 34689

Title	DIRECTOR
Name	COPELAND, PATRICIA
Address	905 E. MARTIN LUTHER KING JR. DRIVE STE 310
City-State-Zip:	TARPON SPRINGS FL 34689

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: JOSEPH DESMARIAS

PRES

04/07/2022

Electronic Signature of Signing Officer/Director Detail_____
Date