

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N41145

**Entity Name:** ARBOR GLEN AT TUSCAWILLA HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 28, 2023**  
**Secretary of State**  
**0936563161CC**

**Current Principal Place of Business:**

ASPIRE COMMUNITY MGMT  
3203 LAWTON ROAD SUITE 130  
ORLANDO, FL 32803

**Current Mailing Address:**

ASPIRE COMMUNITY MGMT  
PO BOX 785169  
WINTER GARDEN, FL 34778 US

**FEI Number: 59-3034018**

**Certificate of Status Desired: No**

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

ASPIRE COMMUNITY MGMT  
3203 LAWTON RD  
SUITE 130  
ORLANDO, FL 32803 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: KATHY BOLLO**

**04/28/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ASHFORD, JASON  
Address        PO BOX 785169  
City-State-Zip: WINTER GARDEN FL 34778

Title            VP  
Name            DAKEL, JAN  
Address        PO BOX 785169  
City-State-Zip: WINTER GARDEN FL 34778

Title            SECRETARY, TREASURER  
Name            TRAVIESO, DION  
Address        PO BOX 785169  
City-State-Zip: WINTER GARDEN FL 34778

Title            DIRECTOR  
Name            VANDERLOOP, ROB  
Address        PO BOX 785169  
City-State-Zip: WINTER GARDEN FL 34778

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: JASON ASHFORD**

**PRESIDENT**

**04/28/2023**

Electronic Signature of Signing Officer/Director Detail

Date