

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42492

Entity Name: CEDARBEND HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**784 JORDON CT
OVIDO, FL 32765**Current Mailing Address:**PO BOX 620985
OVIDO, FL 32762 US**FEI Number:** 59-3058281**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARRISON, BONNIE
784 JORDON CT
OVIDO, FL 32765 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:** BONNIE HARRISON

04/07/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name HARRISON, BONNIE
Address PO BOX 620985
City-State-Zip: OVIDO FL 32762

Title VP, DIRECTOR
Name MARIN, ADELINA
Address PO BOX 620985
City-State-Zip: OVIDO FL 32762

Title TREASURER, DIRECTOR
Name LAWLOR, JOSEPH
Address PO BOX 620985
City-State-Zip: OVIDO FL 32762

Title DIRECTOR
Name STARK, KRISTOPHER
Address PO BOX 620985
City-State-Zip: OVIDO FL 32762

Title SECRETARY, DIRECTOR
Name WAGSTAFF, TIM
Address PO BOX 620985
City-State-Zip: OVIDO FL 32762

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 LAWLOR

DIRECTOR

04/07/2023

Electronic Signature of Signing Officer/Director Detail

Date