2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N43439

Entity Name: HOMES OF REGENCY COVE, INC.

FILED
Aug 08, 2017
Secretary of State
CC1174596321

Current Principal Place of Business:

4851 GANDY BLVD. - OFFICE

TAMPA, FL 33611

Current Mailing Address:

4851 GANDY BLVD. - OFFICE TAMPA, FL 33611

FEI Number: 59-2654048 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHLADWEILER, JOHN 4851 W GANDY BLVD OFFICE TAMPA FL 33611 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: JOHN SCHLADWEILER 08/08/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title VP, TREASURER Title DIRECTOR

Name ULANSKI, MARTY Name TREMBLAY, VICTOR

Address 490 ISLAND WAY Address 4851 GANDY BLVD - B3L24

City-State-Zip: CLEARWATER FL 33767 City-State-Zip: TAMPA FL 33611

Title SECRETARY Title PRESIDENT

Name LOVE, PATRICK J Name WALKER, JENNIE M

Address 4851 W GANDY BLVD B12L27 Address 4851 W GANDY BLVD B7L27

City-State-Zip: TAMPA FL 33611 City-State-Zip: TAMPA FL 33611

Title DIRECTOR Title DIRECTOR

Name ORCUTT, WES Name DAVIS, VIRGINIA

Address 4851 W GANDY BLVD Address 4851 W GANDY BLVD

BLVD 7 LOT 24 BLVD3 LOT 28

City-State-Zip: TAMPA FL 33611 City-State-Zip: TAMPA FL 33611

Title DIRECTOR

Name FAUBERT, MIKE

Address 4851 W GANDY BLVD

BLVD 3 LOT 35

City-State-Zip: TAMPA FL 33611

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: JENNIE WALKER PRESIDENT 08/08/2017