

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N44644

**Entity Name:** EMERALD HILLS HOMEOWNERS ASSOCIATION OF BREVARD COUNTY, INC.

**Current Principal Place of Business:**

860 BROOKVIEW LANE  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

PO BOX 561303  
ROCKLEDGE, FL 32956-1303 US

**FEI Number:** 65-0324648

**Certificate of Status Desired:** No

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

ANGEVINE, ASHLEY  
839 TIFFANY PLACE  
ROCKLEDGE, FL 32955 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:** ASHLEY ANGEVINE

03/12/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            KUNO, DIANA  
Address        PO BOX 561303  
City-State-Zip: ROCKLEDGE FL 32956-1303

Title            VICE PRESIDENT.  
Name            HUSEONICA, SUSAN  
Address        PO BOX 561303  
City-State-Zip: ROCKLEDGE FL 32956-1303

Title            TREASURER.  
Name            ANGEVINE, ASHLEY  
Address        PO BOX 561303  
City-State-Zip: ROCKLEDGE FL 32956-1303

Title            SECRETARY.  
Name            LLOYD, PAT  
Address        PO BOX 561303  
City-State-Zip: ROCKLEDGE FL 32956-1303

Title            ASSISTANT SECRETARY.  
Name            LIDDY, SANDY  
Address        PO BOX 561303  
City-State-Zip: ROCKLEDGE FL 32956-1303

*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:** ASHLEY ANGEVINE

**TREASURER**

03/12/2016

Electronic Signature of Signing Officer/Director Detail

Date