

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000867

Entity Name: POST ROAD CASCADES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

645 CLASSIC COURT
#104
MELBOURNE, FL 32940

Current Mailing Address:

645 CLASSIC COURT
#104
MELBOURNE, FL 32940 US

FEI Number: 59-3374797

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPACE COAST PROPERTY MANAGEMENT OF BREVARD
645 CLASSIC COURT
#104
MELBOURNE, FL 32940 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 DAL
Name KRAUSE, DONALD
Address 4163 CHELAN DR
City-State-Zip: MELBOURNE FL 32934

Title SEC
Name WILLIAMS, AMY
Address 4153 CHELAN DR.
City-State-Zip: MELBOURNE FL 32934

Title VP
Name WALWYN, ORAL
Address 4337 MONTRAUX AVE
City-State-Zip: MELBOURNE FL 32934

Title DAL
Name GRUESSNER, ALFRED
Address 4212 CHELAN DR
City-State-Zip: MELBOURNE FL 32934

Title PRES
Name SCHMIDT, JIM
Address 4057 ESTANCIA WAY
City-State-Zip: MELBOURNE FL 32935

Title TREA
Name CHANEY, ROBERT "DON"
Address 4006 ESTANCIA WAY
City-State-Zip: MELBOURNE FL 32934

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: JIM SCHMIDT

PRESIDENT

03/25/2013

Electronic Signature of Signing Officer/Director Detail

Date