

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000001546

**Entity Name:** THE RESERVE AT DEBARY HOMEOWNERS ASSOCIATION, INC**FILED**  
**Mar 05, 2020**  
**Secretary of State**  
**3204902897CC****Current Principal Place of Business:**640 E. STATE ROAD 434  
SUITE 3000  
LONGWOOD, FL 32750**Current Mailing Address:**640 E. STATE ROAD 434  
SUITE 3000  
LONGWOOD, FL 32750 US**FEI Number: 59-3306292****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BONO & ASSOCIATES, LLC  
640 E. STATE ROAD 434  
SUITE 3000  
LONGWOOD, FL 32750 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: MICHAEL L BONO****03/05/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** PRESIDENT  
**Name** SHOTTS, DOUG  
**Address** 640 E. STATE ROAD 434  
SUITE 3000  
**City-State-Zip:** LONGWOOD FL 32750**Title** TREASURER  
**Name** COOLIDGE, LORI  
**Address** 640 E. STATE ROAD 434  
SUITE 3000  
**City-State-Zip:** LONGWOOD FL 32750**Title** DIRECTOR  
**Name** KELSEY, RICHARD L  
**Address** 640 E. STATE ROAD 434  
SUITE 3000  
**City-State-Zip:** LONGWOOD FL 32750**Title** VP, DIRECTOR  
**Name** KIEFER, HEATHER  
**Address** 640 E. STATE ROAD 434  
SUITE 3000  
**City-State-Zip:** LONGWOOD FL 32750**Title** SECRETARY  
**Name** GOLKA, GABRIELLE  
**Address** 640 E. STATE ROAD 434  
SUITE 3000  
**City-State-Zip:** LONGWOOD FL 32750**Title** COMMUNITY MANAGEMENT - OWNER  
**Name** BONO, MICHAEL  
**Address** 640 E. STATE ROAD 434  
SUITE 3000  
**City-State-Zip:** LONGWOOD FL 32750

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: DOUG SHOTTS****PRESIDENT****03/05/2020**

Electronic Signature of Signing Officer/Director Detail

Date