

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004999

Entity Name: DEAN'S RESERVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9927 KONA ISLE CT.
ORLANDO, FL 32817

Current Mailing Address:

C/O LIGHTHOUSE MANAGEMENT & CONSULTING
P.O. BOX 0774
WINDERMERE, FL 34786-0774 US

FEI Number: 59-3363478

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE LAW OFFICE OF PAUL T. HINCKLEY
ATTN: PAUL HINCKLEY
37 N. ORANGE AVE. SUITE 500
ORLANDO, FL 32801 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: PAUL T. HINCKLEY

04/30/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY, DIRECTOR
Name BROWN, MICHELE
Address 2812 CEDENA COVE STREET
City-State-Zip: ORLANDO FL 32817

Title VP, DIRECTOR
Name YARBER, ELAINE
Address 9912 BURGUNDY BAY
City-State-Zip: ORLANDO FL 32817

Title PRESIDENT, DIRECTOR
Name LESTER, DEAN
Address 9927 KONA ISLE CT
City-State-Zip: ORLANDO FL 32817

Title DIRECTOR
Name MEYER, CHAD
Address 2800 CEDENA COVE STREET
City-State-Zip: ORLANDO FL 32817

Title TREASURER, DIRECTOR
Name CHAE, JOON
Address 2806 CEDENA COVE STREET
City-State-Zip: ORLANDO FL 32817

Title DIRECTOR
Name SHELNUTT, STEVE
Address 9925 BURGUNDY BAY STREET
City-State-Zip: ORLANDO FL 32817

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: DEAN LESTER

PRESIDENT

04/30/2020

Electronic Signature of Signing Officer/Director Detail

Date