2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004999

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

FILED Apr 30, 2019 **Secretary of State** 9158730956CC

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 04/30/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

SECRETARY, DIRECTOR Title Title VP, DIRECTOR **BROWN. MICHELE** Name Name YARBER, ELAINE Address 2812 CEDENA COVE STREET Address 9912 BURGUNDY BAY ORLANDO FL 32817 City-State-Zip: ORLANDO FL 32817 City-State-Zip:

Title **DIRECTOR** Title PRESIDENT, DIRECTOR LESTER, DEAN Name MEYER, CHAD Name Address

2800 CEDENA COVE STREET Address 9927 KONA ISLE CT City-State-Zip: ORLANDO FL 32817

Title TREASURER, DIRECTOR

Name CHAE, JOON

City-State-Zip:

Address 2806 CEDENA COVE STREET

ORLANDO FL 32817

City-State-Zip: ORLADNO 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.

04/30/2019 **PRESIDENT** SIGNATURE: DEAN LESTER