Officer/Director Detail :			
Title	PRESIDENT	Title	VP
Name	COSTELLO, SCOTT	Name	HOWELL, ASHLEY
Address	2630 CROOKED ANTLER DRIVE	Address	2630 CROOKED ANTLER DRIVE
City-State-Zip:	MELBOURNE FL 32934	City-State-Zip:	MELBOURNE FL 32934
Title	SECRETARY	Title	DIRECTOR
Name	VERBURG, SUSAN	Name	BEAR, CHRISTIAN
Address	2630 CROOKED ANTLER DRIVE	Address	2630 CROOKED ANTLER DRIVE
City-State-Zip:	MELBOURNE FL 32934	City-State-Zip:	MELBOURNE FL 32934
Title	DIRECTOR	Title	DIRECTOR
Name	HAYES, KEVIN	Name	HOFFMAN, MICHAEL
Address	2630 CROOKED ANTLER DRIVE	Address	2630 CROOKED ANTLER DRIVE
City-State-Zip:	MELBOURNE FL 32934	City-State-Zip:	MELBOURNE FL 32934
Title	DIRECTOR	Title	DIRECTOR
Name	KAH, JEAN-CLAUDE	Name	NEISLER, CHRISTOPHER
Address	2630 CROOKED ANTLER DRIVE	Address	2630 CROOKED ANTLER DRIVE
City-State-Zip:	MELBOURNE FL 32934	City-State-Zip:	MELBOURNE FL 32934

SIGNATURE: SCOTT COSTELLO

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

COSTELLO, SCOTT 2630 CROOKED ANTLER DRIVE MELBOURNE, FL 32934 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.

2630 CROOKED ANTLER DRIVE

Electronic Signature of Registered Agent

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# Entity Name: FAWN COVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:** 

2630 CROOKED ANTLER DRIVE MELBOURNE, FL 32934

DOCUMENT# N9600002103

#### **Current Mailing Address:**

MELBOURNE. FL 32934 US

#### FEI Number: 59-3376986

### Certificate of Status Desired: No

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: MICHAEL HOFFMAN

City-State-Zip: MELBOURNE FL 32934

DIRECTOR

#### 01/16/2020

Electronic Signature of Signing Officer/Director Detail

FILED Jan 16, 2020 Secretary of State

> 01/16/2020 Date

## 4061605037CC

Date