323 CIRCLE DRIV MAITLAND, FL 3				
Current Mailin	ng Address:			
323 CIRCLE D MAITLAND, F				
FEI Number: 59-3427943			Certificate of Status Desired: No	
Name and Ad	dress of Current Registered Agent:			
VISTA COMMUNT 323 CIRCLE DRIV MAITLAND, FL 32				
323 CIRCLE DRIV MAITLAND, FL 32	/E	ered office or regis	tered agent, or both, in the State of Flo	rida.
323 CIRCLE DRIV MAITLAND, FL 32 The above named er	/E 2751 US	ered office or regis	tered agent, or both, in the State of Flo	rida. 04/03/2023
323 CIRCLE DRIV MAITLAND, FL 32 The above named er	/E 2751 US ntity submits this statement for the purpose of changing its regist	ered office or regis	tered agent, or both, in the State of Flo	
323 CIRCLE DRIV MAITLAND, FL 32 The above named er	VE 2751 US ntity submits this statement for the purpose of changing its regist TINA YAMADA Electronic Signature of Registered Agent	ered office or regis	tered agent, or both, in the State of Flo	04/03/2023
323 CIRCLE DRIV MAITLAND, FL 32 The above named er SIGNATURE: Officer/Directo	VE 2751 US ntity submits this statement for the purpose of changing its regist TINA YAMADA Electronic Signature of Registered Agent	ered office or regist	tered agent, or both, in the State of Flo	04/03/2023
323 CIRCLE DRIV MAITLAND, FL 32 The above named er SIGNATURE: Officer/Directo Title V	/E 2751 US ntity submits this statement for the purpose of changing its regist TINA YAMADA Electronic Signature of Registered Agent or Detail :			04/03/2023
323 CIRCLE DRIV MAITLAND, FL 32 The above named er SIGNATURE: Officer/Directo Title V Name T	VE 2751 US ntity submits this statement for the purpose of changing its regist TINA YAMADA Electronic Signature of Registered Agent or Detail :	Title	DIRECTOR	04/03/2023

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: LUIS BELLO

Title

Title

Name

Address

Name

Address

City-State-Zip:

PRESIDENT

TREASURER

SANCHEZ, LUIS

323 CIRCLE DRIVE

MAITLAND FL 32751

04/03/2023 Date

Electronic Signature of Signing Officer/Director Detail

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600004040

Entity Name: DANIELS CROSSING HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

PRESIDENT

BELLO, LUIS

SECRETARY

City-State-Zip: MAITLAND FL 32751

323 CIRCLE DRIVE

MAITLAND FL 32751

MATIENZO, JUDITH 323 CIRCLE DRIVE

FILED Apr 03, 2023 Secretary of State 3939513058CC

Title

Name

Address

City-State-Zip: