

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004188

Entity Name: SIGNATURE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

300 SIGNATURE TERRACE
SAFETY HARBOR, FL 34695

Current Mailing Address:

PO BOX 237
SAFETY HARBOR, FL 34695 US

FEI Number: 59-3416741

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ECKARD, CHARLEEN CHARLEEN ECKARD
3110 PALM HARBOR BLVD
PALM HARBOR, FL 34683 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: CHARLEEN ECKARD

04/15/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name COIA, DAVID
Address SIGNATURE TERRACE
City-State-Zip: SAFETY HARBOR FL 34695

Title VP
Name GIORGIONE, DAVID
Address 307 SIGNATURE TERRACE
City-State-Zip: SAFETY HARBOR FL 34695

Title TREASURER
Name ECKARD, CHARLEEN
Address 303 SIGNATURE TERRACE
City-State-Zip: SAFETY HARBOR FL 34695

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: CHARLEEN ECKARD

TREASURER

04/15/2019

Electronic Signature of Signing Officer/Director Detail

Date