#### **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000004188

Entity Name: SIGNATURE ESTATES HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 24, 2020
Secretary of State
3884749348CC

## **Current Principal Place of Business:**

300 SIGNATURE TERRACE SAFETY HARBOR. FL 34695

## **Current Mailing Address:**

300 SIGNATURE TERRACE SAFETY HARBOR. FL 34695 US

FEI Number: 59-3416741 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

RABIN PARKER, P.A. 28059 U.S. HWY 19 NORTH, SUITE 301 CLEARWATER, FL 33761 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PRESIDENT Title VP

Name COIA, DAVID Name MADAN, SANJAY

Address SIGNATURE TERRACE Address SIGNATURE TERRACE

City-State-Zip: SAFETY HARBOR FL 34695 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** 

01/24/2020