## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005723

Entity Name: BLUE HERON BAY AT IBIS GOLF AND COUNTRY CLUB

HOMEOWNERS ASSOCIATION, INC.

FILED
Sep 24, 2018
Secretary of State
CC4451542208

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

C/O FIRSTSERVICE RESIDENTIAL 11621 KEW GARDENS AVE STE 200 PALM BEACH GARDENS, FL 33410

## **Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL 11621 KEW GARDENS AVE STE 200 PALM BEACH GARDENS, FL 33410 US

FEI Number: 65-0808645 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LAW OFFICES OF GARY D. FIELDS 1930 COMMERCE LN SUITE 1 JUPITER. FL 33458 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: GARY D. FIELDS 09/24/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title TREASURER

Name FLEISCHAUER, DON Name FLEISCHAUER, DONALD

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

11621 KEW GARDENS AVE STE 200 11621 KEW GARDENS AVE STE 200

City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip: PALM BEACH GARDENS FL 33410

Title VP Title SECRETARY

Name SRIDHAR, LAKSHMI Name PALMERO, CAMILLE

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

11621 KEW GARDENS AVE STE 200 11621 KEW GARDENS AVE STE 200

City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR Title DIRECTOR

Name MASSERIO JR, JAMES Name HELLER, CYNTHIA

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

11621 KEW GARDENS AVE STE 200 11621 KEW GARDENS AVE STE 200

City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR

Name DICOSOLA, LEONARDO

Address C/O FIRSTSERVICE RESIDENTIAL

11621 KEW GARDENS AVE STE 200

City-State-Zip: PALM BEACH GARDENS FL 33410

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: DON FLEISCHAUER PRESIDENT 09/24/2018