

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

DOCUMENT# N99000001261

**FILED**  
**Mar 09, 2020**  
**Secretary of State**  
**1430874672CC**

**Entity Name:** GLEN HAVEN MOBILE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3649 GLENHAVEN CIRCLE  
ZEPHYRHILLS, FL 33541

**Current Mailing Address:**

3649 GLENHAVEN CIRCLE  
ZEPHYRHILLS, FL 33541 US

**FEI Number: 35-4120056**

**Certificate of Status Desired: Yes**

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

HUDSON, LES  
3649 GLENHAVEN CIR  
ZEPHYRHILLS, FL 33541 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: LES HUDSON**

**03/09/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HUDSON, LES  
Address        3649 GLENHAVEN CIRCLE  
City-State-Zip: ZEPHYRHILLS FL 33541

Title            VP  
Name            CARROLL, PAT  
Address        3727 GLENHAVEN CIRCLE  
City-State-Zip: ZEPHYRHILLS FL 33541

Title            SECRETARY  
Name            RADTKE, LINDA  
Address        3625 GLENHAVEN CIRCLE  
City-State-Zip: ZEPHYRHILLS FL 33541

Title            TREASURER  
Name            ROULEAU, LOLLY  
Address        3631 GLENHAVEN CIRCLE  
City-State-Zip: ZEPHYRHILLS FL 33541

Title            DIRECTOR  
Name            BURNS, JOSEPH  
Address        3746 GLENHAVEN CIRCLE  
City-State-Zip: ZEPHYRHILLS FL 33541

Title            DIRECTOR  
Name            BOYD, BRIAN  
Address        3550 GLENHAVEN CIRCLE  
City-State-Zip: ZEPHYRHILLS FL 33541

Title            DIRECTOR  
Name            MAPLE, MICHAEL  
Address        3630 GLEN HAVEN CIRCLE  
City-State-Zip: ZEPHYRHILLS FL 33541

Title            DIRECTOR  
Name            JOYCE, TOM  
Address        3519 GLEN HAVEN CIRCLE  
City-State-Zip: ZEPHYRHILLS FL 33541

*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: LES HUDSON**

**PRESIDENT**

**03/09/2020**

Electronic Signature of Signing Officer/Director Detail

Date