

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003404

Entity Name: WOODHAVEN ESTATES VILLAS PROPERTY OWNERS ASSOCIATION, INC.

FILED
Apr 12, 2024
Secretary of State
3117099368CC

Current Principal Place of Business:

C/O CASEY CONDO MANAGEMENT
4370 S. TAMIAMI TRAIL, STE 102
SARASOTA, FL 34231

Current Mailing Address:

C/O CASEY CONDO MANAGEMENT
4370 S. TAMIAMI TRAIL, STE 102
SARASOTA, FL 34231

FEI Number: 65-0947259

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASEY CONDOMINIUM MGMT
4370 SOUTH TAMIAMI TR
SUITE 102
SARASOTA, FL 34231 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 AS
Name SPENCE, BRIDGET
Address 4370 S. TAMIAMI TRAIL #102
City-State-Zip: SARASOTA FL 34231

Title PRESIDENT
Name HIPPENSTEEL, STEVE
Address C/O CASEY CONDO MANAGEMENT
4370 S. TAMIAMI TRAIL, STE 102
City-State-Zip: SARASOTA FL 34231

Title VP
Name MAGNO, MARY LOU
Address C/O CASEY CONDO MANAGEMENT
4370 S. TAMIAMI TRAIL, STE 102
City-State-Zip: SARASOTA FL 34231

Title SECRETARY
Name BARCZAK, GERRY
Address C/O CASEY CONDO MANAGEMENT
4370 S. TAMIAMI TRAIL, STE 102
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR
Name ADAMITIS, BOB
Address C/O CASEY CONDO MANAGEMENT
4370 S. TAMIAMI TRAIL, STE 102
City-State-Zip: SARASOTA FL 34231

Title DIRECTOR
Name CARON, FRANCIS
Address C/O CASEY CONDO MANAGEMENT
4370 S. TAMIAMI TRAIL, STE 102
City-State-Zip: SARASOTA FL 34231

Title TREASURER
Name BAUER, JEFF
Address C/O CASEY CONDO MANAGEMENT
4370 S. TAMIAMI TRAIL, STE 102
City-State-Zip: SARASOTA FL 34231

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: BRIDGET SPENCE

ASSISTANT SECRETARY 04/12/2024

Electronic Signature of Signing Officer/Director Detail

Date