

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

DOCUMENT# 740600

**Entity Name:** STEEPLECHASE PROPERTY OWNERS' ASSOCIATION, INC.

**FILED**  
**Nov 02, 2020**  
**Secretary of State**  
**6867816954CC**

**Current Principal Place of Business:**

11784 W. SAMPLE RD.  
SUITE #103  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

11784 W. SAMPLE RD.  
SUITE #103  
CORAL SPRINGS, FL 33065 US

**FEI Number: 59-1824597**

**Certificate of Status Desired: No**

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

UNITED COMMUNITY MANAGEMENT CORP.  
11784 W. SAMPLE RD.  
SUITE #103  
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL**

**11/02/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           KESMAN, ALAN  
Address        11784 W. SAMPLE RD.  
                  SUITE #103  
City-State-Zip: CORAL SPRINGS FL 33065

Title           PRESIDENT  
Name           MOORE, DAVID  
Address        11784 W. SAMPLE RD.  
                  SUITE #103  
City-State-Zip: CORAL SPRINGS FL 33065

Title           DIRECTOR  
Name           MARSHALL, CORI  
Address        11784 W. SAMPLE RD.  
                  SUITE #103  
City-State-Zip: CORAL SPRINGS FL 33065

Title           SECRETARY  
Name           FISHER, CHARLES  
Address        11784 W. SAMPLE RD.  
                  SUITE #103  
City-State-Zip: CORAL SPRINGS FL 33065

Title           VP  
Name           KANEL, AMIR  
Address        11784 W. SAMPLE RD.  
                  SUITE #103  
City-State-Zip: CORAL SPRINGS FL 33065

*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: MOORE , DAVID**

**PRESIDENT**

**11/02/2020**

Electronic Signature of Signing Officer/Director Detail

Date