

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763844

Entity Name: DOVE HOLLOW HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**3681 RUSTY GRACKLE DRIVE
PALM HARBOR, FL 34683**Current Mailing Address:**P.O. BOX 742
PALM HARBOR, FL 34682 US**FEI Number:** 57-1285804**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GRUBBS, HUGH
3681 RUSTY GRACKLE DRIVE
PALM HARBOR, FL 34683 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
Name KOHLER, CHARLES
Address 3544 SNOWY EGRET CT.
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name CHAPLINSKY, ANTHONY
Address 3547 GLOSSY IBIS CT
City-State-Zip: PALM HARBOR FL 34683

Title SECRETARY
Name KOHLER, PAMELA
Address 3544 SNOWY EGRET CT.
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name WOODS, SUSAN
Address 3496 SNOWY EGRET CT.
City-State-Zip: PALM HARBOR FL 34683

Title T
Name DOEL, SUSAN
Address 3537 SNOWY EGRET CT.
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name SCALES, ROXANNE
Address 3522 GLOSSY IBIS CT.
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name CIOTUSZYNSKI, MISTY
Address 3497 SNOWY EGRET CT.
City-State-Zip: PALM HARBOR FL 34683

Title VP
Name CIOTUSZYNSKI, MIKE
Address 3497 SNOWY EGRET CT.
City-State-Zip: PALM HARBOR FL 34683

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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: SUSAN DOEL**TREASURER****03/21/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name TILLEY, BETH
Address 3473 SNOWY EGRET CT.
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name DENEALT, MIKE
Address 2222 BLUE TERN
City-State-Zip: PALM HARBOR FL 34683