## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 769680** 

Entity Name: CEDAR RUN OF MELBOURNE HOMEOWNERS ASSOCIATION,

INC.

Apr 20, 2017 Secretary of State CC3241401274

**FILED** 

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

7145 TURNER ROAD

SUITE 101

ROCKLEDGE, FL 32955

## **Current Mailing Address:**

7145 TURNER ROAD SUITE 101 ROCKLEDGE, FL 32955 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

OMEGA COMMUNITY MANAGEMENT 7145 TURNER ROAD SUITE 101 ROCKLEDGE. FL 32955 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 PRES Title VP

Name FOWLER, BRUCE Name ROUNSAVILLE, CHARLET

Address 7145 TURNER ROAD Address 7145 TURNER ROAD

SUITE 101 SUITE 101

City-State-Zip: ROCKLEDGE FL 32955 City-State-Zip: ROCKLEDGE FL 32955

Title SEC Title TRES

Name UHLAND, KELLY Name LAROCQUE, CHRISTINA

Address 7145 TURNER ROAD Address 7145 TURNER ROAD

SUITE 101 SUITE 101

City-State-Zip: ROCKLEDGE FL 32955 City-State-Zip: ROCKLEDGE FL 32955

Title DIR Title DIR

Name BURKOTT, SCOTT Name CANTILLON, MICHAEL

7145 TURNER ROAD Address 7145 TURNER ROAD SUITE 101 SUITE 101

SOITE I

City-State-Zip: ROCKLEDGE FL 32955 City-State-Zip: ROCKLEDGE FL 32955

Title DIR

Address

Name RILEY, DAVE

Address 7145 TURNER ROAD

SUITE 101

City-State-Zip: ROCKLEDGE FL 32955

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: BRUCE FOWLER PRESIDENT 04/20/2017