## 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 770883** 

Entity Name: COUNTRYSIDE PUD UNIT III-B HOMEOWNERS ASSOCIATION,

INC

**Current Principal Place of Business:** 

2842 REGENT CRESCENT ST. S. DAYTONA, FL 32119

## **Current Mailing Address:**

2842 REGENT CRESCENT ST. S. DAYTONA, FL 32119 US

FEI Number: 59-2479207 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CHATLEY, NANCY D 2842 REGENT CRESCENT ST. S. DAYTONA, FL 32119 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: NANCY D. CHATLEY 06/16/2016

Title

VΡ

Electronic Signature of Registered Agent

Date

**FILED** 

Jun 16, 2016

Secretary of State CC9520456405

## Officer/Director Detail:

Р

Title

Name	KLEMENT, JOHN	Name	NORRIS, BARBARA ADIR
Address	926 N. LAKEWOOD TERRACE	Address	904 N LAKEWOOD TERR
City-State-Zip:	PORT ORANGE FL 32127	City-State-Zip:	PORT ORANGE FL 32127

Title TREASURER Title D, SECRETARY

NameMAYNARD, SANDY DIRNameCOCKERHAM, SUSANAddress943 N. LAKEWOOD TERR.Address925 FOREST GLEN DRIVECity-State-Zip:PORT ORANGE FL 32127City-State-Zip:PORT ORANGE FL 32127

Title DIRECTOR Title DIRECTOR

Name GOSLINE, CLAUDIA Name ILLAN , ROBERT

Address 903 N. LAKEWOOD TERRACE Address 953 CRYSTAL LAKE DRIVE
City-State-Zip: PORT ORANGE FL 32127 City-State-Zip: PORT ORANGE FL 32127

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: JOHN KLEMENT PRESIDENT

Electronic Signature of Signing Officer/Director Detail

06/16/2016 Date