

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770883

FILED
Jan 26, 2024
Secretary of State
3179557959CC

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

Current Principal Place of Business:

344 S WOODLAND BLVD
DELAND, FL 32720

Current Mailing Address:

C/O GOODFELLOW & CO., CPA
344 S. WOODLAND BLVD
DELAND , FL 32720 US

FEI Number: 59-2479207

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOODFELLOW & CO., CPA
344 S WOODLAND BLVD
DELAND, FL 32720 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 GOODFELLOW

01/26/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GOSLINE, CLAUDIA
Address C/O GOODFELLOW & CO., CPA
344 S WOODLAND BLVD
City-State-Zip: DELAND FL 32720

Title SECRETARY, TREASURER
Name BLANCHARD, DONNA
Address C/O GOODFELLOW & CO., CPA
344 S WOODLAND BLVD
City-State-Zip: DELAND FL 32720

Title PRESIDENT
Name GILLELAND, MAUREEN
Address C/O GOODFELLOW & CO., CPA
344 S WOODLAND BLVD
City-State-Zip: DELAND FL 32720

Title VP
Name MURPHY, ROBERT
Address C/O GOODFELLOW & CO., CPA
344 S WOODLAND BLVD
City-State-Zip: DELAND FL 32720

Title DIRECTOR
Name MALATESTA, CARISSA
Address C/O GOODFELLOW & CO., CPA
344 S. WOODLAND BLVD
City-State-Zip: DELAND FL 32720

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: DONNA BLANCHARD

SECRETARY/TREASURER 01/26/2024

Electronic Signature of Signing Officer/Director Detail

Date