2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771089

Entity Name: STRATFORD PLACE SOUTH HOMEOWNERS ASSOCIATION,

INC.

N.I.

Apr 24, 2018 Secretary of State CC2038308420

FILED

Current Principal Place of Business:

788 E VICTORIA CIRCLE ORMOND BEACH, FL 32174

Current Mailing Address:

788 E. VICTORIA CIRCLE ORMOND BEACH, FL 32174 US

FEI Number: 59-2406755 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRES. HOA 798 E. VICTORIA CIRCLE ORMOND BEACH, FL 32174 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: STEVE MAKRIS 04/24/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR

Name MAKRIS, STEVE Name HELM, KATHLEEN

Address 788 E VICTORIA CIR Address 823 W. VICTORIA CIRCLE

City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip: ORMOND BCH FL 32174

Title D Title TREASURER

NameLAWRENCE, RICHARDNameSTANLEY, JANICE MAddress793 E. VICTORIA CIRCLEAddress798 E. VICTORIA CIRCLE

City-State-Zip: ORMOND BEACH FL City-State-Zip: ORMOND BEACH FL 32174

Title SECRETARY Title DIRECTOR

NameHELM, KATHLENENamePARENT, DARLENEAddress823 W. VICTORIA CIRCLEAddress799 E. VICTORIA CR.

City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR

Name MAKRIS, STEVE

Address 788 E. VICTORIA CR.

City-State-Zip: ORMOND BEACH FL 32174

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: JANICE STANLEY TREASURER 04/24/2018