

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000002559

**Entity Name:** GEM ESTATES M H V ASSOC., INC.

**Current Principal Place of Business:**

39415 ELGIN DR  
ZEPHYRHILLS, FL 33542

**Current Mailing Address:**

39415 ELGIN DR  
ZEPHYRHILLS, FL 33542 US

**FEI Number:** 59-2391102

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SLIPP, BRENT L.  
39407 ROCKFORD AVENUE  
ZEPHYRHILLS, FL 33542 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:** BRENT L SLIPP

02/03/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BELL, RICK  
Address        39439 ROCKFORD AVE  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            TREASURER  
Name            MANN, SANDY L.  
Address        39415 ELGIN DR  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            2ND VICE PRESIDENT  
Name            SHARP, LARRY  
Address        39401 DUNDEE ROAD  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            1ST VICE PRESIDENT  
Name            LYNCH, MARY KAY  
Address        39600 ELGIN DRIVE  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            SECRETARY, TREASURER  
Name            WINSTON, SHARON  
Address        39652 ELGIN DRIVE  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            DIRECTOR  
Name            TOTH, JAN  
Address        39412 ROCKFORD AVE  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            DIRECTOR  
Name            MESEC, DEBORAH  
Address        39451 STERLING DRIVE  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            DIRECTOR  
Name            ROBERTS, CANDACE  
Address        39500 ELGIN DRIVE  
City-State-Zip: ZEPHYRHILLS FL 33542

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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:** SANDY L MANN

**TREASURER**

02/03/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name BROWN, LINDA  
Address 39512 DUNDEE ROAD  
City-State-Zip: ZEPHYRHILLS FL 33542

Title DIRECTOR  
Name SMITH, CHERYL  
Address 39407 ROCKFORD AVENUE  
City-State-Zip: ZEPHYRHILLS FL 33542

Title VP  
Name PRATT, ANDRE  
Address 39433 STERLING DRIVE  
City-State-Zip: ZEPHYRHILLS FL 33542