

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000932

Entity Name: STAGECOACH RANCH ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

11524 S BRIGHTSTAR AVE
FLORAL CITY, FL 34436

Current Mailing Address:

PO BOX 225
FLORAL CITY, FL 34436

FEI Number: 02-0600163

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PALMER, AMANDA C
11508 S BRIGHTSTAR AVE
FLORAL CITY, FL 34436 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: AMANDA PALMER

01/22/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | | | |
|-----------------|------------------------|-----------------|-----------------------|
| Title | VP | Title | PRESIDENT |
| Name | FOWLER, JOSHUA | Name | PALMER, AMANDA |
| Address | 5802 E QUICKSILVER CT | Address | 5803 E QUICKSILVER CT |
| City-State-Zip: | FLORAL CITY FL 34436 | City-State-Zip: | FLORAL CITY FL 34436 |
| | | | |
| Title | SECRETARY, TREASURER | | |
| Name | GRAHAM, LISA | | |
| Address | 11524 S BRIGHTSTAR AVE | | |
| City-State-Zip: | FLORAL CITY FL 34436 | | |

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: AMANDA PALMER

PRESIDENT

01/22/2024

Electronic Signature of Signing Officer/Director Detail

Date