

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000000932

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

**Current Principal Place of Business:**

1545 FOREST DR  
INVERNESS, FL 34453

**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:**

ROBINSON & COMPANY, P.A.  
1545 FOREST DRIVE  
INVERNESS, FL 34453 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name DURRETT, HARRY  
Address 5750 E SWEETGRASS CT  
City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR  
Name PALMER, AMANDA  
Address 5803 E QUICKSILVER CT  
City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR  
Name GRAHAM, LISA  
Address 11524 S BRIGHTSTAR AVE  
City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR  
Name IOVANNISCI, JOANNE  
Address 5802 E QUICKSILVER CT  
City-State-Zip: FLORAL CITY FL 34436

Title DIRECTOR  
Name TONNIGES, TODD  
Address 11106 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: HARRY DURRETT**

**SECRETARY**

**02/18/2019**

Electronic Signature of Signing Officer/Director Detail

Date