

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001181

Entity Name: FAWN RIDGE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**721 FAWN RIDGE DRIVE
ORANGE CITY, FL 32763**Current Mailing Address:**PO BOX 236967
COCOA, FL 32923**FEI Number:** 04-3656469**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WELLS, HEATHER MANAGER
721 FAWN RIDGE DRIVE
ORANGE CITY, FL 32763 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:** HEATHER WELLS

01/23/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name PAGAN, ELUID
Address PO BOX 236967
City-State-Zip: COCOA FL 32923

Title DIRECTOR
Name AUSTIN, MARGRET
Address PO BOX 236967
City-State-Zip: COCOA FL 32923

Title VP
Name O'CONNOR, WILLIAM
Address PO BOX 236967
City-State-Zip: COCOA FL 32923

Title D
Name SWEET, RENNIE
Address PO BOX 236967
City-State-Zip: COCOA FL 32923

Title SECRETARY
Name SALZANO, KATHY
Address PO BOX 236967
City-State-Zip: COCOA FL 32923

Title PRESIDENT
Name GRIMM, HARRY
Address POBOX 236967
City-State-Zip: COCOA FL 32923

Title DIRECTOR
Name GRAZIANO, MICHAEL
Address PO BOX 236967
City-State-Zip: COCOA FL 32923

Title D
Name WARNER, JANE
Address PO BOX 236967
City-State-Zip: COCOA FL 32923

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 GRIMM

P

01/23/2016

Electronic Signature of Signing Officer/Director Detail

Date