

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002589

Entity Name: SIENNA RIDGE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O CONSOLIDATED COMMUNITY MGMT
7124 N. NOB HILL ROAD
TAMARAC, FL 33321**Current Mailing Address:**C/O CONSOLIDATED COMMUNITY MGMT
7124 N. NOB HILL ROAD
TAMARAC, FL 33321 US**FEI Number:** 65-1088188**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JENNINGS & VALANCY, P.A.
311 S.E. 13TH STREET
FORT LAUDERDALE, FL 33316 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:** STEVEN VALANCY

02/01/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PUSEY, KURT R
Address C/O CONSOLIDATED COMMUNITY
MGMT
7124 N. NOB HILL ROAD
City-State-Zip: TAMARAC FL 33321

Title VP
Name HENRY, ANTOINETTE
Address C/O CONSOLIDATED COMMUNITY
MGMT
7124 N. NOB HILL ROAD
City-State-Zip: TAMARAC FL 33321

Title TREASURER
Name GARRICKS, VINETTE
Address C/O CONSOLIDATED COMMUNITY
MGMT
7124 N. NOB HILL ROAD
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name RADY, PATRICK
Address C/O CONSOLIDATED COMMUNITY
MGMT
7124 N. NOB HILL ROAD
City-State-Zip: TAMARAC FL 33321

Title SECRETARY
Name TURNER, COLEEN
Address C/O CONSOLIDATED COMMUNITY
MGMT
7124 N. NOB HILL ROAD
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name MCNABB, KURT
Address C/O CONSOLIDATED COMMUNITY
MGMT
7124 N. NOB HILL ROAD
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name GROSVENOR, NICOLE
Address C/O CONSOLIDATED COMMUNITY
MGMT
7124 N. NOB HILL ROAD
City-State-Zip: TAMARAC FL 33321

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: KURT PUSEY

PRES

02/01/2021

Electronic Signature of Signing Officer/Director Detail

Date