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.

PRESIDENT

SIGNATURE: WILLIAM H. PAUL

Electronic Signature of Signing Officer/Director Detail

# Entity Name: ARISTA HOMEOWNERS ASSOCIATION, INC.

### **Current Principal Place of Business:**

2411 FOUNTAIN GRASS DRIVE VALRICO, FL 33594

DOCUMENT# N0500000391

### Current Mailing Address:

P.O. BOX 2113 VALRICO, FL 33595

### FEI Number: 90-0268100

### Name and Address of Current Registered Agent:

PAUL, WILLIAM H 2411 FOUNTAIN GRASS DRIVE VALRICO, FL 33594 US

Date

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

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### Officer/Director Detail :

Title		Т	Title	D
Nam	e	CONSOLVER, DONALD	Name	GODBEE, JOHNNY (JAY)
Addr	ess	2307 FOUNTAIN GRASS DRIVE	Address	2407 DRAKE ELM TERRACE
City-	State-Zip:	VALRICO FL 33594	City-State-Zip:	VALRICO FL 33594
Title		Р	Title	S
THIC		1		
Nam	e	PAUL, WILLIAM H	Name	LEVY, CANDY
Addr	ess	2411 FOUNTAIN GRASS DRIVE	Address	2306 SILVER TRUMPET CT.
City-	State-Zip:	VALRICO FL 33594	City-State-Zip:	VALRICO FL 33594
Title		VP		
Nam	e	MARTIN, PAUL		
Addr	ess	905 ARISTA BLVD.		
City-	State-Zip:	VALRICO FL 33594		

## Certificate of Status Desired: No

03/28/2020 Date