

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008526

Entity Name: THE ESTATES AT LIMONA WOODS HOMEOWNERS ASSOCIATION, INC.**FILED**
Mar 06, 2025
Secretary of State
8715142014CC**Current Principal Place of Business:**3018 N. U.S. HWY 301
SUITE 950
TAMPA, FL 33619**Current Mailing Address:**3018 N. U.S. HWY 301
SUITE 950
TAMPA, FL 33619 US**FEI Number: 20-3867096****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BAILEY, RICHARD
3018 N. U.S. HIGHWAY 301, SUITE 950
TAMPA, FL 33619 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: RICHARD BAILEY****03/06/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRESIDENT
Name ROSENAU, APRIL
Address 3018 N. U.S. HWY 301
 SUITE 950
City-State-Zip: TAMPA FL 33619Title VP
Name JONES, BRANDON
Address 3018 N. U.S. HWY 301
 SUITE 950
City-State-Zip: TAMPA FL 33619Title TREASURER
Name WESTBERRY, KEVIN
Address 3018 N. U.S. HWY 301
 SUITE 950
City-State-Zip: TAMPA FL 33619Title SECRETARY
Name MAY, JUSTIN
Address 3018 N. U.S. HWY 301
 SUITE 950
City-State-Zip: TAMPA FL 33619Title DIRECTOR
Name ALLEN, DEBORAH
Address 3018 N. U.S. HWY 301
 SUITE 950
City-State-Zip: TAMPA FL 33619

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: APRIL ROSENAU**PRESIDENT****03/06/2025**

Electronic Signature of Signing Officer/Director Detail

Date