## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008815

Entity Name: SLEEPY HILL ESTATES HOMEOWNERS' ASSOCIATION OF

POLK COUNTY, INC.

**Current Principal Place of Business:** 

2539 IRIS ANN DRIVE LAKELAND, FL 33810-5565

**Current Mailing Address:** 

P.O. BOX 1482

LAKELAND, FL 33802 US

FEI Number: 20-3504655 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HEBNER, BLAIR 2539 IRIS ANN DRIVE LAKELAND, FL 33810 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: BLAIR HEBNER 01/03/2019

Electronic Signature of Registered Agent Date

Address

Officer/Director Detail:

P.O. BOX 1482

Address

Title TREASURER Title PRESIDENT

NameHEBNER, BLAIRNameMARKWELL, BILLYAddressP.O. BOX 1482AddressP.O. BOX 1482

City-State-Zip: LAKELAND FL 33802 City-State-Zip: LAKELAND FL 33802

Title SECRETARY Title VF

Name COURTNEY, BRITTANY Name CONNORS, TRACY

City-State-Zip: LAKELAND FL 33802 City-State-Zip: LAKELAND FL 33802

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: BLAIR HEBNER

Electronic Signature of Signing Officer/Director Detail

**TREASURER** 

P.O. BOX 1482

01/03/2019

FILED Jan 03, 2019

**Secretary of State** 

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