2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 05, 2023
Secretary of State
9944903739CC

DOCUMENT# N05457

Entity Name: CHICKASAW OAKS PHASE THREE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O GOOD HELP MANAGEMENT
3564 AVALON BLVD. EAST SUITE #1-145
ORLANDO, FL 32828

Current Mailing Address:

C/O GOOD HELP MANAGEMENT
3564 AVALON BLVD. EAST SUITE #1-145
ORLANDO, FL 32828 US

FEI Number: 59-2588789

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOOD HELP MANAGEMENT
C/O GOOD HELP MANAGEMENT
3564 AVALON BLVD. EAST SUITE #1-145
ORLANDO, FL 32828 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: RODNEY D. COTTEN 07/05/2023

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR	Title	VP, DIRECTOR
Name	FULTON, WILLIAM	Name	PEREZ, TERESA
Address	C/O GOOD HELP MANAGEMENT 3564 AVALON BLVD. EAST SUITE #1-145	Address	C/O GOOD HELP MANAGEMENT 3564 AVALON BLVD. EAST SUITE #1-145
City-State-Zip:	ORLANDO FL 32828	City-State-Zip:	ORLANDO FL 32828
Title	TREASURER, DIRECTOR	Title	SECRETARY, DIRECTOR
Name	SAMPSON, JEANIE	Name	BURNER, DEBI
Address	C/O GOOD HELP MANAGEMENT 3564 AVALON BLVD. EAST SUITE #1-145	Address	C/O GOOD HELP MANAGEMENT 3564 AVALON BLVD. EAST SUITE #1-145
City-State-Zip:	ORLANDO FL 32828	City-State-Zip:	ORLANDO FL 32828
Title	DIRECTOR	Title	DIRECTOR
Name	CLOUCHETE, CASEY	Name	FLORES, XIOMARA
Address	C/O GOOD HELP MANAGEMENT 3564 AVALON BLVD. EAST SUITE #1-145	Address	C/O GOOD HELP MANAGEMENT 3564 AVALON BLVD. EAST SUITE #1-145
City-State-Zip:	ORLANDO FL 32828	City-State-Zip:	ORLANDO FL 32828
Title	DIRECTOR		
Name	AT LARGE, DIRECTOR		
Address	C/O GOOD HELP MANAGEMENT 3564 AVALON BLVD. EAST SUITE #1-145		
City-State-Zip:	ORLANDO FL 32828		

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: WILLIAM FULTON PRESIDENT 07/05/2023

Electronic Signature of Signing Officer/Director Detail Date