

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07835

Entity Name: TROPICAL HARBOR MOBILE HOMEOWNERS ASSOCIATION, INC.**FILED**
Feb 03, 2023
Secretary of State
3574664256CC**Current Principal Place of Business:**27 RICKERT DRIVE
LAKE PLACID, FL 33852**Current Mailing Address:**27 RICKERT DRIVE
LAKE PLACID, FL 33852 US**FEI Number: 59-2522188****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HEY, SHELLEY
341 BELLE TOWER AVE
LAKE PLACID, FL 33852 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: SHELLEY HEY****02/03/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	CORNWELL, MELANIE
Address	97 BEARWOODS AVE
City-State-Zip:	LAKE PLACID FL 33852

Title	MEMBERSHIP
Name	HUDNALL, PAUL
Address	201 BEAUREGARD ST
City-State-Zip:	LAKE PLACID FL 33852

Title	TREASURER
Name	HEY, SHELLEY L
Address	341 BELLE TOWER AVE
City-State-Zip:	LAKE PLACID FL 33852

Title	VP
Name	WEST, DAVID
Address	22 RICKERT DR
City-State-Zip:	LAKE PLACID FL 33852

Title	SECRETARY
Name	CALLAHAN, JOANN
Address	342 BELLE TOWER
City-State-Zip:	LAKE PLACID FL 33852

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: SHELLEY HEY**TREASURER****02/03/2023**

Electronic Signature of Signing Officer/Director Detail

Date