

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003907

Entity Name: TIPPECANOE HILLS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1615 VILLAGE SQUARE BLVD
SUITE 3
TALLAHASSEE, FL 32309

Current Mailing Address:

1615 VILLAGE SQUARE BLVD
SUITE 3
TALLAHASSEE, FL 32309 US

FEI Number: 26-2452540

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MY HOA SERVICES, LLC
1615 VILLAGE SQUARE BLVD
SUITE 3
TALLAHASSEE, FL 32309 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: KATHLEEN A CARLSON

04/04/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP, D
Name JOHNSON, RITA
Address 2319 FLINT RUN
City-State-Zip: TALLAHASSEE FL 32303

Title P, D
Name BLITTMAN, SAMUEL
Address 2267 WABASH TRAIL
City-State-Zip: TALLAHASSEE FL 32303

Title AUTHORIZED REPRESENTATIVE
Name CARLSON, KATHLEEN A
Address 1615 VILLAGE SQUARE BLVD
SUITE 3
City-State-Zip: TALLAHASSEE FL 32309

Title S, T, D
Name MEEKS, LINDA
Address 2506 TIPPECANOE RIDGE
City-State-Zip: TALLAHASSEE FL 32303

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: KATHLEEN A CARLSON

AUTHORIZED REP

04/04/2025

Electronic Signature of Signing Officer/Director Detail

Date