

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08542

**Entity Name:** COACHWOOD COLONY HOME OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

500 OLD COLONY RD  
LEESBURG, FL 34748

**Current Mailing Address:**

500 OLD COLONY RD  
LEESBURG, FL 34748 US

**FEI Number: 59-2998476**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FAUSETT, CHRISTINE M  
500 OLD COLONY RD  
LEESBURG, FL 34748 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            KINGSLEY, NORMAN  
Address        2633 HOLLY PLACE  
City-State-Zip: LEESBURG FL 34748

Title            BM  
Name            HERSOM, DEBBIE  
Address        728 COACHWOOD EAST  
City-State-Zip: LEESBURG FL 34748

Title            VICE-PRESIDENT  
Name            SOLIS, MICHEAL  
Address        746 CALLIANDRA COURT  
City-State-Zip: LEESBURG FL 34748

Title            SECRETARY  
Name            VETTER, CAROL  
Address        718 COACHWOOD EAST  
City-State-Zip: LEESBURG FL 34748

Title            TREASURER  
Name            FAUSETT, CHRISTINE  
Address        500 OLD COLONY ROAD  
City-State-Zip: LEESBURG FL 34748

*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: CHRISTINE FAUSETT**

**TREASURER**

**03/07/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date