

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

**FILED  
Apr 08, 2024  
Secretary of State  
1444323329CC**

DOCUMENT# N11400

**Entity Name:** COUNTRY WOODS HOMEOWNERS ASSOCIATION OF DUNEDIN, INC.

**Current Principal Place of Business:**

24701 US HIGHWAY 19 N  
SUITE 102  
CLEARWATER, FL 33763

**Current Mailing Address:**

24701 US HIGHWAY 19 N  
SUITE 102  
CLEARWATER, FL 33763 US

**FEI Number: 59-2912007**

**Certificate of Status Desired: No**

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

BROWDER, KAREN  
24701 US HIGHWAY 19 N  
SUITE 102  
CLEARWATER, FL 33763 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: KAREN BROWDER** **04/08/2024**  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title PRES  
Name LEVY, HOWARD  
Address 24701 US HIGHWAY 19 N  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title TD  
Name SANCHEZ, ALEJUNDRO  
Address 24701 US HIGHWAY 19 N  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title VPD  
Name REIF, MARLENE  
Address 24701 US HIGHWAY 19 N  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title SD  
Name CARLSON, JERRY  
Address 24701 US HIGHWAY 19 N  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title DIR  
Name JOHNS, JAMES  
Address 24701 US HIGHWAY 19 N  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title DIR  
Name AMARO, MARK  
Address 24701 US HIGHWAY 19 N  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title DIR  
Name OVITT, KATHY  
Address 24701 US HIGHWAY 19 N  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

Title DIR  
Name READ, DIANA  
Address 24701 US HIGHWAY 19 N  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763

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*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: HOWARD LEVY** **PRESIDENT** **04/08/2024**  
Electronic Signature of Signing Officer/Director Detail Date

**Officer/Director Detail Continued :**

Title DIR  
Name MCKENNA, ERIKA  
Address 24701 US HIGHWAY 19 N  
SUITE 102  
City-State-Zip: CLEARWATER FL 33763