

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000004264

**Entity Name:** HOMEOWNERS ASSOCIATION OF ARROYA CASSA, INC.

**Current Principal Place of Business:**

234 S. BLUE HERON DRIVE, UNIT 3  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

234 S. BLUE HERON DRIVE, UNIT 3  
SANTA ROSA BEACH, FL 32459

**FEI Number:** 46-5471206

**Certificate of Status Desired:** No

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

KLEINHUIZEN, KURT S  
234 S. BLUE HERON DRIVE, UNIT 3  
SANTA ROSA BEACH, FL 32459 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 DP  
Name GUEST, RICHARD  
Address 368 TRAWICK DR  
City-State-Zip: DOTHAN AL 36305

Title DV  
Name KURT, KLEINHUIZEN S  
Address 234 S. BLUE HERON DRIVE, UNIT 3  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title DST  
Name KLEINHUIZEN, KURT S  
Address 234 S. BLUE HERON DRIVE, UNIT 3  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title D  
Name CLIFTON, CHARLES  
Address 1301 ST. ANDREWS DR.  
City-State-Zip: SHELBYVILLE KY 40065

*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:** KURT KLEINHUIZEN

DV DST

01/19/2018

Electronic Signature of Signing Officer/Director Detail

Date