

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000008837

Entity Name: HOMEOWNERS ASSOCIATION OF AVALON COVE, INC.**Current Principal Place of Business:**370 CENTERPOINTE CIRCLE, STE 1136
ALTAMONTE SPRINGS, FL 32701**Current Mailing Address:**370 CENTERPOINTE CIRCLE, STE 1136
ALTAMONTE SPRINGS, FL 32701 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PITT, LAWRENCE B
370 CENTERPOINTE CIRCLE, SUITE 1136
ALTAMONTE SPRINGS, FL 32701 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:** LAWRENCE B. PITT

03/03/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DP
Name	STEARNS, M. SCOTT
Address	370 CENTERPOINTE CIRCLE, SUITE 1136
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	DVP
Name	HUTSON II, ROBERT T
Address	370 CENTERPOINTE CIRCLE, SUITE 1136
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	DST
Name	NILLIES, OLAF
Address	370 CENTERPOINTE CIRCLE, SUITE 1136
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

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: M. SCOTT STEARNS

PRESIDENT

03/03/2021

Electronic Signature of Signing Officer/Director Detail

Date