#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21585

Entity Name: ESSEX POINT SOUTH HOMEOWNERS ASSOCIATION, INC.

FILED Feb 16, 2015 Secretary of State CC8155724478

# **Current Principal Place of Business:**

5756 S SEMORAN BLVD ORLANDO. FL 32822

## **Current Mailing Address:**

5756 S. SEMORAN BLVD. ORLANDO, FL 32822 US

FEI Number: 59-2859481 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HOUSE OF MANAGEMENT ENTERPRISES FOR COMMUNITY ASSOCIATIONS, INC. 5756 S SEMORAN BLVD ORLANDO, FL 32822 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: CHERYL ZOOK 02/16/2015

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	PRESIDENT	Title	VP

Name PALMER, DONALD Name CORVI, PAUL

Address 5756 S SEMORAN BLVD Address 5756 S SEMORAN BLVD
City-State-Zip: ORLANDO FL 32822 City-State-Zip: ORLANDO FL 32822

Title DIRECTOR Title TREASURER

NamePADILLA, DANIELNameBERRY, DEBORAHAddress5756 S SEMORAN BLVDAddress5756 S SEMORAN BLVDCity-State-Zip:ORLANDO FL 32822City-State-Zip:ORLANDO FL 32822

TitleDIRECTORTitleSECRETARYNameTREESE, KELLENameHUNT, BRIAN

Address 5756 S SEMORAN BLVD Address 5756 S SEMORAN BLVD
City-State-Zip: ORLANDO FL 32822 City-State-Zip: ORLANDO FL 32822

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: DONALD PALMER PRESIDENT 02/16/2015