2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26709

Entity Name: SPANISH TRAILS WEST HOME OWNERS ASSOCIATION, INC.

FILED
Apr 17, 2020
Secretary of State
4776098908CC

Current Principal Place of Business:

7142 PISCINA STREET ZEPHYRHILLS, FL 33541

Current Mailing Address:

7142 PISCINA STREET ZEPHYRHILLS, FL 33541

FEI Number: 59-2936074 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GORDON, SCOTT E ONE SARASOTA TOWER TWO NORTH TAMIAMI TRAIL FIFTH FLOOR SARASOTA, FL 34236 US

TREASURER, DIRECTOR

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.

Title

DIRECTOR

SIGNATURE:

Title

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Name	FOOTE, ERNEST	Name	WILLIAMS, JOSEPH
Address	7142 PISCINA ST.	Address	7142 PISCINA ST.
City-State-Zip:	ZEPHRYHILLS FL 33541	City-State-Zip:	ZEPHYRHILLS FL 33541
Title	DIRECTOR	Title	PRESIDENT, DIRECTOR

THIC	BIREGISIK	1100	TREGIDENT, BIRLOTOR
Name	JACK , PUGH	Name	MORRISON, TIM
Address	7141 PISCINA ST.	Address	7141 PISCINA ST.
City-State-Zip:	ZEPHRYHILLS FL 33541	City-State-Zip:	ZEPHYRHILLS FL 33541

ritie	DIRECTOR	Title	DODTED CINDY
Title	DIRECTOR	Title	SECRETARY, DIRECTOR

Name	DEANE, CHARLES	Name	PORTER, CINDY
Address	7141 PISCINA ST.	Address	7141 PISCINA ST.

Title	DIRECTOR. ASSISTANT TREASURER	Title	EXECUTIVE SECRETARY
ritte	DIRECTOR, ASSISTANT TREASURER		

Name	LAWRENCE, ROBERT	Name	ENO, CARLA S
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Address	7141 PISCINA ST.	Address	7142 PISCINA STREET
		City State Zing	7EDIIVDIIII C EL 22544

City-State-Zip: ZEPHYRHILLS FL 33541 City-State-Zip: ZEPHYRHILLS FL 33541

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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: CARLA ENO OFFICE ADMIN. 04/17/2020

Officer/Director Detail Continued:

TitleVP, DIRECTORTitleDIRECTORNamePETE, TOMNameCROTTY, DAVIDAddress7142 PISCINA ST.Address7142 PISCINA ST

City-State-Zip: ZEPHYRHILLS FL 33541 City-State-Zip: ZEPHYRHILLS FL 33541