

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34631

Entity Name: BERRYHILL HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**245 SOUTH CENTRAL AVENUE
BARTOW, FL 33831**Current Mailing Address:**P.O. BOX 7011
WINTER HAVEN, FL 33883 US**FEI Number: 59-2975474****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHILTON, ROBERT C ESQ
245 SOUTH CENTRAL AVENUE
BARTOW, FL 33830 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: ROBERT C CHILTON****04/24/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OTHER, CAM
Name PAUL, SCHARLENE
Address P O BOX 1411
City-State-Zip: WINTER HAVEN FL 33882

Title DIRECTOR
Name LYNCH, MARILYN
Address P O BOX 7011
City-State-Zip: WINTER HAVEN FL 33882

Title VP
Name SMEAL, BARBARA
Address 322 4TH STREET NW
City-State-Zip: WINTER HAVEN FL 33881

Title PRESIDENT
Name RUSS, ROGER
Address 322 4TH STREET NW
City-State-Zip: WINTER HAVEN FL 33881

Title TREASURER
Name THOMASON, GUS
Address P.O. BOX 7011
City-State-Zip: WINTER HAVEN FL 33883

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: SCHARLENE PAUL**MANAGER****04/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date