

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006308

Entity Name: DEVONS GLEN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

928 E. NEW HAVEN AVE.
MELBOURNE, FL 32901

Current Mailing Address:

928 E. NEW HAVEN AVE.
MELBOURNE, FL 32901 US

FEI Number: 59-3319968

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPACE COAST PROPERTY MANAGEMENT OF BREVARD
928 E. NEW HAVEN AVE.
MELBOURNE, FL 32901 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 TREASURER
Name BADURE, MARIA
Address 928 E. NEW HAVEN AVE.
City-State-Zip: MELBOURNE FL 32901

Title VP
Name LYNCH, JOHN
Address 928 E. NEW HAVEN AVE.
City-State-Zip: MELBOURNE FL 32901

Title PRESIDENT
Name CLAWSON, KEN
Address 928 E. NEW HAVEN AVE.
City-State-Zip: MELBOURNE FL 32901

Title SECRETARY
Name CLAWSON, NACHAWIN
Address 928 E. NEW HAVEN AVE.
City-State-Zip: MELBOURNE FL 32901

Title DAL
Name GUERRERO, VICTOR
Address 928 E. NEW HAVEN AVE.
City-State-Zip: MELBOURNE FL 32901

Title DAL
Name PADEN, BOB
Address 928 E. NEW HAVEN AVE.
City-State-Zip: MELBOURNE FL 32901

Title DAL
Name LAMMERS, BRIAN
Address 928 E. NEW HAVEN AVE.
City-State-Zip: MELBOURNE FL 32901

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: MARIA BADURE

TREASURER

04/09/2018

Electronic Signature of Signing Officer/Director Detail

Date