

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005356

Entity Name: HAMMOCKS AT RIVERGLEN HOMEOWNERS ASSOCIATION, INC.**FILED**
May 07, 2024
Secretary of State
8670718585CC**Current Principal Place of Business:**C/O FYVE PROPERTY MANAGEMENT
5100 W. COPANS RD SUITE 410
MARGATE, FL 33063**Current Mailing Address:**C/O FYVE PROPERTY MANAGEMENT
5100 W. COPANS RD SUITE 410
MARGATE, FL 33063 US**FEI Number:** 90-0454587**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GLAZER & ASSOCIATES
3113 STIRLING RD
STE 201
FT. LAUDERDALE, FL 33312 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:** ERIC GLAZER

05/07/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	PURVIN, STEVE
Address	C/O FYVE PROPERTY MANAGEMENT 5100 W. COPANS RD SUITE 410
City-State-Zip:	MARGATE FL 33063

Title	VP
Name	CORDOBA, SILVESTRE
Address	C/O FYVE PROPERTY MANAGEMENT 5100 W. COPANS RD SUITE 410
City-State-Zip:	MARGATE FL 33063

Title	PRESIDENT
Name	RIVAS, MELISSA
Address	C/O FYVE PROPERTY MANAGEMENT 5100 W. COPANS RD SUITE 410
City-State-Zip:	MARGATE FL 33063

Title	DIRECTOR
Name	BABOOLAL, RICKIE
Address	C/O FYVE PROPERTY MANAGEMENT 5100 W. COPANS RD SUITE 410
City-State-Zip:	MARGATE FL 33063

Title	SECRETARY
Name	VILLA, TRACI
Address	C/O FYVE PROPERTY MANAGEMENT 5100 W. COPANS RD SUITE 410
City-State-Zip:	MARGATE FL 33063

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: RIVAS , MELISSA

PRESIDENT

05/07/2024

Electronic Signature of Signing Officer/Director Detail

Date