## 2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

DOCUMENT# N9700000368

Entity Name: HERITAGE OAKS GOLF VILLAS ASSOCIATION, INC.

**FILED** Jul 21, 2023 Secretary of State 7676385098CC

## **Current Principal Place of Business:**

C/O REALMANAGE 2477 STICKNEY POINT ROAD SUITE 118-A SARASOTA, FL 34231

## **Current Mailing Address:**

C/O REALMANAGE PO BOX 803555 DALLAS, TX 75380 US

FEI Number: 65-0728486 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WELLS OLAH, P.A. 3277 FRUITVILLE RD **BUILDING B** SARASOTA, FL 34237 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: WELLS OLAH 07/21/2023

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title **TREASURER** 

Name PEYREK, THEODORE Name FUHRMAN, DENNIS

C/O REALMANAGE Address C/O REALMANAGE Address

2477 STICKNEY POINT ROAD SUITE 2477 STICKNEY POINT ROAD SUITE 118-A 118-A

SARASOTA FL 34231 SARASOTA FL 34231 City-State-Zip: City-State-Zip:

VΡ Title Title **PRESIDENT** CECCONI, LOUANNE FLORY, DANIEL Name Name

Address C/O REALMANAGE Address C/O REALMANAGE 2477 STICKNEY POINT ROAD SUITE 2477 STICKNEY POINT ROAD SUITE

118-A 118-A

City-State-Zip: SARASOTA FL 34231 City-State-Zip: SARASOTA FL 34231

Title **SECRETARY** 

Address

Name MAYNES, ROBERT

C/O REALMANAGE 2477 STICKNEY POINT ROAD SUITE

118-A

SARASOTA FL 34231 City-State-Zip:

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.

07/21/2023 SIGNATURE: DANIEL FLORY **PRESIDENT** 

Date