

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000003380

**FILED**  
**Jan 23, 2019**  
**Secretary of State**  
**1976893522CC**

**Entity Name:** REGENCY PLACE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

170 LADY DIANA DRIVE  
DAVENPORT, FL 33837

**Current Mailing Address:**

170 LADY DIANA DRIVE  
DAVENPORT, FL 33837

**FEI Number: 59-3518982**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

JOHNSON, BURT PRES  
466 LADY DIANA DRIVE  
DAVENPORT, FL 33837 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: BURT JOHNSON**

**01/23/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name RIGG, JOHN  
Address 506 PRINCE CHARLES DRIVE  
City-State-Zip: DAVENPORT FL 33837

Title S/T  
Name WILSON, SHERI  
Address 112 PRINCE CHARLES DRIVE  
City-State-Zip: DAVENPORT FL 33837

Title D  
Name MITCHELL, NANCY DIR  
Address 406 LADY DIANA DRIVE  
City-State-Zip: DAVENPORT FL 33837

Title D  
Name DODD, BRACK DIR  
Address 456 LADY DIANA DRIVE  
City-State-Zip: DAVENPORT FL 33837

Title D.  
Name DEMPSTER, BARBARA  
Address 306 PRINCE CHARLES DRIVE  
City-State-Zip: DAVENPORT FL 33837

Title D.  
Name HOLLAND, CHUCK  
Address 536 PRINCE CHARLES DRIVE  
City-State-Zip: DAVENPORT FL 33837

*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: SHERI WILSON**

**SECRETARY-TREASURER 01/23/2019**

Electronic Signature of Signing Officer/Director Detail

Date