

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005236

Entity Name: CRANE'S LANDING HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3902 BRIDGES RD
GROVELAND, FL 34736

Current Mailing Address:

P.O. BOX 1009
GROVELAND, FL 34736 US

FEI Number: 59-3533799

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOSAIC SERVICES LLC
3902 BRIDGES RD
GROVELAND, FL 34736 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: JENNIFER S CAIN

01/29/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MARLENE, HENAO
Address P.O. BOX 1009
City-State-Zip: GROVELAND FL 34736

Title DIRECTOR
Name EDWARDS, MICHELLE
Address P.O. BOX 1009
City-State-Zip: GROVELAND FL 34736

Title SECRETARY, TREASURER
Name BRUNO, MARY
Address P.O. BOX 1009
City-State-Zip: GROVELAND FL 34736

Title PRESIDENT
Name CENTRELLO, RON
Address P.O. BOX 1009
City-State-Zip: GROVELAND FL 34736

Title VP
Name BATES, KIMBERELY
Address P.O. BOX 1009
City-State-Zip: GROVELAND FL 34736

Title DIRECTOR
Name SIMONE, JOHN F
Address P.O. BOX 1009
City-State-Zip: GROVELAND FL 34736

Title DIRECTOR
Name WHITE, DEBORAH F
Address P.O. BOX 1009
City-State-Zip: GROVELAND FL 34736

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: RON CENTRELLO

PRESIDENT

01/29/2025

Electronic Signature of Signing Officer/Director Detail

Date