

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G92679

FILED
Mar 19, 2016
Secretary of State
CC2720388167

Entity Name: ARIANA SHORES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

116A PARADISE LANE
AUBURNDALE, FL 33823

Current Mailing Address:

116A PARADISE LANE
AUBURNDALE, FL 33823 US

FEI Number: 59-2387985

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COCHRAN, MARY E
160 HOLIDAY LN
AUBURNDALE, FL 33823 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: MARY E COCHRAN

03/19/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name COCHRAN, MARY E
Address 160 HOLIDAY LN
City-State-Zip: AUBURNDALE FL 33823

Title VP
Name REAKER, JOHN
Address 130 HOLIDAY LANE
City-State-Zip: AUBURNDALE FL 33823

Title SECRETARY
Name BROWN, BARBARA
Address 161 PARADISE LN
City-State-Zip: AUBURNDALE FL 33823

Title DIRECTOR
Name HOLZMAN, RONALD
Address 173 PARADISE LN
City-State-Zip: AUBURNDALE FL 33823

Title TREASURER
Name REAKER, DARLENE
Address 121 PARADISE LN
City-State-Zip: AUBURNDALE FL 33823

Title DIRECTOR
Name PHILLIPS, EUNICE
Address 128 HOLIDAY LN
City-State-Zip: AUBURNDALE FL 33823

Title DIRECTOR
Name BROWN, DAVID
Address 144 HOLIDAY LN
City-State-Zip: AUBURNDALE FL 33823

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY COCHRAN

PRESIDENT

03/19/2016

Electronic Signature of Signing Officer/Director Detail

Date