2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H58326

Entity Name: MARY LU HOMEOWNERS ASSOCIATION, INC.

FILED Apr 05, 2021 **Secretary of State** 4822891758CC

Current Principal Place of Business:

24437 HARBORVIEW RD.

OFC 222

PORT CHARLOTTE, FL 33980-2399

Current Mailing Address:

24437 HARBORVIEW RD.

OFC 222

PORT CHARLOTTE, FL 33980-2399 US

FEI Number: 59-2593151 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALLER, KAREN E ESQ. 490 1ST AVENUE SOUTH, SUITE 700 ST. PETERSBURG, FL 33701 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: KAREN E. MALLER 04/05/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip:

OFC. 222

PRESIDENT Title Title **SECRETARY** SANBORN, DICK Name Name RIST, LYDIA

Address 24437 HARBORVIEW RD, Address 24437 HARBORVIEW RD.

OFC 222

PORT CHARLOTTE FL 33980 PORT CHARLOTTE FL 33980-2399 City-State-Zip: City-State-Zip:

Title **TREASURER** Title VICE PRESIDENT ADAMS, JOY Name KRUMWIEDE, JANICE Name

24437 HARBORVIEW RD, 24437 HARBORVIEW RD, Address Address OFC 222

OFC 222

PORT CHARLOTTE FL 33980-2399 PORT CHARLOTTE FL 33980-2399 City-State-Zip:

Title **DIRECTOR** Title DIRECTOR ADAMS, KEN WEIST, TONY Name Name

24437 HARBORVIEW RD, 24437 HARBORVIEW RD, Address Address

OFC 222 OFC 222

PORT CHARLOTTE FL 33980-2399 PORT CHARLOTTE FL 33980-2399 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR** Name SLEIGHT, RALPH Name ROGERS, KEITH

Address 24437 HARBORVIEW RD, 24437 HARBORVIEW RD, Address

> OFC 222 OFC 222

PORT CHARLOTTE FL 33980-2399 City-State-Zip: PORT CHARLOTTE FL 33980-2399 City-State-Zip:

Continues on page 2

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.

04/05/2021 SIGNATURE: DICK SANBORN PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name STEWART, DAVE

Address 24437 HARBORVIEW RD,

OFC 222

City-State-Zip: PORT CHARLOTTE FL 33980-2399

Title DIRECTOR

Name RONNEBAUM, JUDY

Address 24437 HARBORVIEW RD,

OFC 222

City-State-Zip: PORT CHARLOTTE FL 33980-2399

Title DIRECTOR

Name WILLIAMS, CAROL

Address 24437 HARBORVIEW RD,

OFC 222

City-State-Zip: PORT CHARLOTTE FL 33980-2399