

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763073

**Entity Name:** THE RANCHES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

9099 S. THOROUGHBRED PT.  
INVERNESS, FL 34452

**Current Mailing Address:**

P.O. BOX 928  
INVERNESS, FL 34451 US

**FEI Number:** 59-2244231

**Certificate of Status Desired:** No

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

MCMULLEN, JOYCE  
9099 S. THOROUGHBRED PT.  
INVERNESS, FL 34452 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:** JOYCE MCMULLEN

01/19/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           CARTER, JOLENE M  
Address        9065 S THOROUGHBRED PT  
City-State-Zip: INVERNESS FL 34452

Title           SECRETARY  
Name           MCMULLEN, JOYCE  
Address        9099 S. THOROUGHBRED PT.  
City-State-Zip: INVERNESS FL 34452

Title           DIRECTOR  
Name           MARTIN-SPRAY, CHERI  
Address        4605 E STALLION LN  
City-State-Zip: INVERNESS FL 34452

Title           DIRECTOR  
Name           SANSONE, FREDDIE  
Address        8853 S THOROUGHBRED PT  
City-State-Zip: INVERNESS FL 34452

Title           PRESIDENT  
Name           BERBERT, JENNIFER  
Address        8819 S. FILLY PT.  
City-State-Zip: INVERNESS FL 34452

Title           DIRECTOR  
Name           SANSONE, RONNIE  
Address        4703 E STALLION LN  
City-State-Zip: INVERNESS FL 34452

Title           VP  
Name           SANSONE, SHELLEY  
Address        8853 S THOROUGHBRED PT  
City-State-Zip: INVERNESS FL 34452

*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:** JOLENE M CARTER

TREASURE

01/19/2022

Electronic Signature of Signing Officer/Director Detail

Date