## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 716998** 

Entity Name: MAINLANDS OF TAMARAC BY THE GULF, UNIT NO. THREE

ASSOCIATION, INC.

Jan 30, 2019 Secretary of State 1459150713CC

**FILED** 

### **Current Principal Place of Business:**

10161 49TH STREET NORTH, SUITE L

PINELLAS PARK, FL 33782

## **Current Mailing Address:**

10161 49TH STREET NORTH, SUITE L PINELLAS PARK, FL 33782 US

FEI Number: 59-1514235 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KIRHAGIS, MOLLIE 10161 49TH STREET NORTH, SUITE L PINELLAS PARK, FL 33782 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: DOMINICK SCANNAVINO

01/30/2019

Electronic Signature of Registered Agent

Date

# Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title VP, DIRECTOR

Name ENGSTROM, DEBRA Name GEORGE, FRANK

Address 10161 49TH STREET NORTH, SUITE L Address 10161 49TH STREET NORTH, SUITE L

City-State-Zip: PINELLAS PARK FL 33782 City-State-Zip: PINELLAS PARK FL 33782

 Title
 TREASURER, DIRECTOR
 Title
 DIRECTOR

 Name
 MANN, LAURA
 Name
 HELMICK, BOB

Address 10161 49TH STREET NORTH, SUITE L Address 10161 49TH STREET NORTH, SUITE L

City-State-Zip: PINELLAS PARK FL 33782 City-State-Zip: PINELLAS PARK FL 33782

Title DIRECTOR Title DIRECTOR

Name URQUHART, LLOYD Name TROUTMAN, JANET

Address 10161 49TH STREET NORTH, SUITE L Address 10161 49TH STREET NORTH, SUITE L

City-State-Zip: PINELLAS PARK FL 33782 City-State-Zip: PINELLAS PARK FL 33782

Title SECRETARY, DIRECTOR

Name SMITH, SHARON

Address 10161 49TH STREET NORTH, SUITE L

City-State-Zip: PINELLAS PARK FL 33782

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: DEBRA ENGSTROM PRESIDENT

Electronic Signature of Signing Officer/Director Detail

01/30/2019 Date