

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717919

Entity Name: FLORIDA APARTMENT ASSOCIATION, INC.**Current Principal Place of Business:**105 E. ROBINSON STREET
STE 301
ORLANDO, FL 32801**Current Mailing Address:**105 E. ROBINSON STREET
STE 301
ORLANDO, FL 32801 US**FEI Number:** 59-1309017**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOLD, JOSH EVP
105 E. ROBINSON STREET
STE 301
ORLANDO, FL 32801 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:** JOSH GOLD

01/04/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WINGATE, SHAWN
Address 4926 NORMANDY COURT
City-State-Zip: CAPE CORAL FL 33904

Title VP
Name TRAINER, LORI
Address 335 N. KNOWLES, #101
City-State-Zip: WINTER PARK FL 32789

Title TREASURER
Name SMETZER, BONNIE
Address 4840 DAIRY RD #104
City-State-Zip: MELBOURNE FL 32904

Title SECRETARY
Name FORD, CECELIA
Address 5640 24TH AVE NORTH
City-State-Zip: ST. PETERSBURG FL 33710

Title ASSOCIATES CHAIR
Name TOUNG, ERIN
Address 947 BEVILLE ROAD
 15
City-State-Zip: SOUTH DAYTONA FL 32119

Title ASSOCIATION EXECUTIVES COUNCIL
 CHAIRMAN
Name TATUM, LENNON
Address 340 N. MAITLAND AVENUE
City-State-Zip: MAITLAND FL 32751

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: SHAWN WINGATE

PRESIDENT

01/04/2017

Electronic Signature of Signing Officer/Director Detail

Date