2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720352

Entity Name: GARDENS OF BEACON SQUARE CONDOMINIUM NUMBER

THREE, INCORPORATED

Current Principal Place of Business:

4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685

Current Mailing Address:

4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US

FEI Number: 59-1634516 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REARDON, MAUREEN C 4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 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: MAUREEN REARDON 04/04/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name FRENCH, LARRY Name CARUSO, MARILYN

Address 4151 WOODLANDS PARKWAY Address 4151 WOODLANDS PARKWAY

City-State-Zip: PALM HARBOR FL 34685 City-State-Zip: PALM HARBOR FL 34685

Title TREASURER Title SECRETARY

Name PECK, MARY Name KOSTBAR, SUSAN

Address 4151 WOODLANDS PARKWAY Address 4151 WOODLANDS PARKWAY

City-State-Zip: PALM HARBOR FL 34685 City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR Title I

Name COBB, JANET Name WALTERS, GARY

Address 4151 WOODLANDS PARKWAY Address 4151 WOODLANDS PARKWAY

City-State-Zip: PALM HARBOR FL 34685 City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR
Name LALOR, SUSAN

Address 4151 WOODLANDS PARKWAY

City-State-Zip: PALM HARBOR FL 34685

above, or on an attachment with all other like empowered.

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

SIGNATURE: LARRY FRENCH PRESIDENT 04/04/2017

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 04, 2017

Secretary of State

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