## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 721373** 

Entity Name: CLOISTERS CONDOMINIUM ASSOCIATION, INC.

FILED Feb 15, 2018 Secretary of State CC2039587776

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

C/O FIRSTSERVICE RESIDENTIAL 385 DOUGLAS AVENUE SUITE 3350 ALTAMONTE SPRINGS, FL 32714

## **Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL 385 DOUGLAS AVENUE SUITE 3350 ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-1355579 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A. 111 N. ORANGE AVENUE SUITE 1400 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: HARRY W. CARLS 02/15/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title SECRETARY

Name SHERRY, JOHN P Name BURTON, LINNELL

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL 385 DOUGLAS AVENUE SUITE 3350 385 DOUGLAS AVENUE SUITE 3350

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title TREASURER Title VP

Name DAVIS, MICHAEL Name SUSSMAN, JOAN

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

385 DOUGLAS AVENUE SUITE 3350 385 DOUGLAS AVENUE SUITE 3350

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title ASST. SECRETARY Title DIRECTOR

Name GIBBONS, CHARLIE Name GRAY, AARON

Name GIBBONS, CHARLIE Name GRAY, AARON

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

385 DOUGLAS AVENUE SUITE 3350 385 DOUGLAS AVENUE SUITE 3350

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR

Name BARR, THOMAS

Address C/O FIRSTSERVICE RESIDENTIAL

385 DOUGLAS AVENUE SUITE 3350

City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: JOHN SHERRY PRESIDENT 02/15/2018