

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725079

Entity Name: CARROLLWOOD VILLAGE CYPRESS CLUSTER HOUSES
CONDOMINIUMS ASSOCIATION, INC.**Current Principal Place of Business:**4131 GUNN HWY
TAMPA, FL 33618**Current Mailing Address:**4131 GUNN HWY
TAMPA, FL 33618 US**FEI Number: 59-1456772****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARDER, GEORGE
23110 STATE RD54
SUITE 157
LUTZ, FL 33549 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: GEORGE HARDER****02/14/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MELENDEZ, DIANE M.
Address 4131 GUNN HWY
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name TRECHTER, CAROLYN
Address 4131 GUNN HWY
City-State-Zip: TAMPA FL 33618

Title TREASURER
Name QUINTELA, ROSE
Address 4131 GUNN HWY
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name HOPF, RUDOLPH
Address 4131 GUNN HWY
City-State-Zip: TAMPA FL 33618

Title VP
Name RODRIGUEZ, RITA A.
Address 4131 GUNN HWY
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name BROWN, ROBERT
Address 4131 GUNN HWY
City-State-Zip: TAMPA FL 33618

Title D
Name FEDEWA, PATRICIA L
Address 4131 GUNN HWY
City-State-Zip: TAMPA FL 33618

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: DIANE M. MELENDEZ**P****02/14/2018**

Electronic Signature of Signing Officer/Director Detail

Date