

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729543

Entity Name: THE ANCHORAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6415 MIDNIGHT PASS RD
SARASOTA, FL 34242

Current Mailing Address:

6415 MIDNIGHT PASS RD
SARASOTA, FL 34242

FEI Number: 59-1714008

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ULRICH, RICHARD ESQ.
ULRICH, SCARLET, DEAN, WICKMAN P.A.
713S. ORANGE AVE
SARASOTA, FL 34201 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES.
Name GRIMMER, DAVE
Address 6415 MIDNIGHT PASS ROAD
 911
City-State-Zip: SARASOTA FL 34242

Title TREA
Name REIDENBACH, JAMES
Address 6415 MIDNIGHT PASS RD
 502
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name GIOCONDO, ROBERT
Address 6415 MIDNIGHT PASS ROAD
 203
City-State-Zip: SARASOTA FL 34242

Title VP
Name DEVITA, KATHLEEN
Address 6415 MIDNIGHT PASS ROAD
 306
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name OBERLE, DOUG
Address 6414 MIDNIGHT PASS RD
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name MCHUGH, EDWARD
Address 6415 MIDNIGHT PASS RD
 510
City-State-Zip: SARASOTA FL 34242

Title SECRETARY
Name SEPER, WILLIAM
Address 6415 MIDNIGHT PASS RD
 411
City-State-Zip: SARASOTA FL 34242

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: JAMES REIDENBACH

TREASURER

02/10/2020

Electronic Signature of Signing Officer/Director Detail

Date