

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729919

Entity Name: CLEARBROOKE TOWNHOUSE CONDOMINIUMS
ASSOCIATION, INC.**FILED**
Apr 30, 2019
Secretary of State
0383069150CC**Current Principal Place of Business:**24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763**Current Mailing Address:**24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763 US**FEI Number: 59-1539303****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LOVETERE, JULIE
24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763 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: JULIE LOVETERE****04/30/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** DIR
Name ZULOAGA, TULIO
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763**Title** VPD
Name GRANT, SCOTT
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763**Title** TD
Name ALVAREZ, KIVA
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763**Title** PD
Name ARMER, TONY
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763**Title** SD
Name PEDULLA, MICHELLE
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763

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: TONY ARMER**PD****04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date