## 2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 734095** 

Entity Name: THE TOWNHOMES OF ORIOLE ASSOCIATION, INC.

FILED
Apr 17, 2017
Secretary of State
CC3544973167

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

C/O M&M PROPERTY MANAGEMENT 1280 SW 36 AVE #305 POMPANO BEACH, FL 33069

## **Current Mailing Address:**

C/O M&M PROPERTY MANAGEMENT 1280 SW 36 AVE #305 POMPANO BEACH, FL 33069 US

FEI Number: 59-1724549 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BUSINESS LAW GROUP, P.A. 301 W PLATT STREET, #375 TAMPA, FL 33606 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 PRESIDENT Title SECRETARY

Name CATALAN, WANDA Name BAPTISTE, SANDRA

Address C/O M&M PROPERTY MANAGEMENT Address C/O M&M PROPERTY MANAGEMENT

1280 SW 36 AVE #305 1280 SW 36 AVE #305

City-State-Zip: POMPANO BEACH FL 33069 City-State-Zip: POMPANO BEACH FL 33069

Title VP Title TREASURER

Name RODIER, CINDEE Name FRANKLIN, ANGELA

Address C/O M&M PROPERTY MANAGEMENT Address C/O M&M PROPERTY MANAGEMENT

1280 SW 36 AVE #305 1280 SW 36 AVE #305

City-State-Zip: POMPANO BEACH FL 33069 City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR

Name CALDERON, MANUEL

Address C/O M&M PROPERTY MANAGEMENT

1280 SW 36 AVE #305

City-State-Zip: POMPANO BEACH FL 33069

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: CINDEE RODIER VP 04/17/2017