2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740860

Entity Name: CANNONGATE PROPERTY OWNER'S ASSOCIATION, INC

FILED Apr 15, 2019 Secretary of State 6763200990CC

Current Principal Place of Business:

8135 LAKE WORTH RD., SUITE B LAKE WORTH. FL 33467

Current Mailing Address:

C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH RD., SUITE B LAKE WORTH, FL 33467 US

FEI Number: 59-2668267 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIATED PROPERTY MANAGEMENT OF THE PALM BEACHES, INC. 8135 LAKE WORTH RD, SUITE B LAKE WORTH, FL 33467 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: ASSOCIATED PROPERTY MANAGEMENT

04/15/2019 Date

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title SECRETARY, TREASURER

Name PETERSON, GWEN Name DAVIES, JUDITH

Address 8135 LAKE WORTH RD., Address 8135 LAKE WORTH RD.,

SUITE B SUITE B

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR Title DIRECTOR

Name CALERO, LUCY Name COLLINS, TERRY

Address 8135 LAKE WORTH RD., Address 8135 LAKE WORTH RD.,

SUITE B SUITE B

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR Title DIRECTOR

Name CORDOVA, HUGO Name SANCHEZ, MARIA

Address 8135 LAKE WORTH RD., Address 8135 LAKE WORTH RD.,

SUITE B SUITE B

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR Title DIRECTOR

Name PINO, NELSON Name HERNANDEZ, IVAN

Address 8135 LAKE WORTH RD., Address 8135 LAKE WORTH RD.,

SUITE B SUITE B

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

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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: GWEN PETERSON PRESIDENT 04/15/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name RASCHKE, TONYA

Address 8135 LAKE WORTH RD.,

SUITE B

City-State-Zip: LAKE WORTH FL 33467