2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742627

Entity Name: VILLA CONDOMINIUM I ASSOCIATION, INC.

FILED Feb 23, 2021 Secretary of State 5832281867CC

Current Principal Place of Business:

1400 LAKE TARPON AVE TARPON SPRINGS. FL 34689

Current Mailing Address:

P.O. BOX 1294

TARPON SPRINGS. FL 34688 US

FEI Number: 59-2069526 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANKLY COASTAL PROPERTY MGMT, LLC DBA ASSOCIATION DATA MANAGEMENT 1400 LAKE TARPON AVE TARPON SPRINGS, FL 34689 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: LYNN PARRISH 02/23/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

 Title
 D
 Title
 DIRECTOR

 Name
 BAZANY, THOMAS
 Name
 SELLERS, BEN A

 Address
 P.O. BOX 1294
 Address
 P.O. BOX 1294

City-State-Zip: TARPON SPRINGS FL 34688 City-State-Zip: TARPON SPRINGS FL 34688

Title TREASURER, SECRETARY Title VP

Name SIEWERT, SANDRA Name ROSS, DALE
Address P.O. BOX 1294 Address P.O. BOX 1294

City-State-Zip: TARPON SPRINGS FL 34688 City-State-Zip: TARPON SPRINGS FL 34688

Title DIRECTOR Title DIRECTOR

Name BURT, GEORGE LEE Name PIER, ALAN

Address P.O. BOX 1294 Address P.O. BOX 1294

City-State-Zip: TARPON SPRINGS FL 34688 City-State-Zip: TARPON SPRINGS FL 34688

Title PRESIDENT

Name ELGIN, ROBERT

Address P.O. BOX 1294

City-State-Zip: TARPON SPRINGS FL 34688

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: ROBERT ELGIN PRESIDENT 02/23/2021