

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743083

FILED
Mar 06, 2024
Secretary of State
1827617367CC

Entity Name: THE QUARTERS AT WINTER PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O EMPIRE MANAGEMENT GROUP, INC.
801 N. MAIN STREET
KISSIMMEE, FL 34744

Current Mailing Address:

C/O EMPIRE MANAGEMENT GROUP, INC.
801 N. MAIN STREET
KISSIMMEE, FL 34744 US

FEI Number: 59-3320300

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EMPIRE MANAGEMENT GROUP, INC
C/O EMPIRE MANAGEMENT GROUP, INC.
801 N. MAIN STREET
KISSIMMEE, FL 34744 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: JOSE Riestra

03/06/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name DERROW, MARTIN
Address C/O EMPIRE MANAGEMENT GROUP, INC.
801 N. MAIN STREET
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name GLOVER, LARRY
Address C/O EMPIRE MANAGEMENT GROUP, INC.
801 N. MAIN STREET
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR, SECRETARY
Name LYS-DOBRADIN, KALINA
Address C/O EMPIRE MANAGEMENT GROUP, INC.
801 N. MAIN STREET
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name PAIN, ELIZABETH
Address C/O EMPIRE MANAGEMENT GROUP, INC.
801 N. MAIN STREET
City-State-Zip: KISSIMMEE FL 34744

Title PRESIDENT
Name SMITH, BLAIR
Address C/O EMPIRE MANAGEMENT GROUP, INC.
801 N. MAIN STREET
City-State-Zip: KISSIMMEE FL 34744

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: BLAIR SMITH

PRESIDENT

03/06/2024

Electronic Signature of Signing Officer/Director Detail

Date