Entity Name: THE TOWNHOMES OF LAKE SEMINOLE PROPERTY OWNERS ASSOCIATION, INC.

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300 ST. PETERSBURG, FL 33716

Current Mailing Address:

DOCUMENT# 745478

PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300 ST. PETERSBURG, FL 33716 US

FEI Number: 59-1875197

Name and Address of Current Registered Agent:

RABIN, BENNETT L PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300 ST. PETERSBURG, FL 33716 US

Certificate of Status Desired: No

The above named entity submits this statement for the nurnose of changing its registered office or registered agent, or both, in the State of Florida

SIGNATURE	E BENNETT RABIN			04/03/20	
	Electronic Signature of Registered Agent			Date	
Officer/Dired	ctor Detail :				
itle	PRESIDENT	Title	VP		
lame	DEMPERIO, JOAN	Name	FULLERMAN, JIM		
ddress	PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300	Address	PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300		
ity-State-Zip:	ST. PETERSBURG FL 33716	City-State-Zip:	ST. PETERSBURG FL 33716		
itle	TREASURER	Title	DIRECTOR		
lame	RAY, ROBERT	Name	SCHUMACHER, DAVE		
ddress	PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300	Address	PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300		
ity-State-Zip:	ST. PETERSBURG FL 33716	City-State-Zip:	ST. PETERSBURG FL 33716		
itle	SECRETARY	Title	DIRECTOR		
lame	DEPASQUALE, PHILLIP	Name	POWERS, LAURA		
ddress	PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300	Address	PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300		
City-State-Zip:	ST. PETERSBURG FL 33716	City-State-Zip:	ST. PETERSBURG FL 33716		
itle	DIRECTOR				
lame	WINTERS, RYAN				
ddress	PBM 10033 DOCTOR MARTIN LUTHER KING ST. N 300				
City-State-Zip:	ST. PETERSBURG FL 33716				

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: PHILLIP DEPASQUALE

04/03/2024

FILED Apr 03, 2024 Secretary of State 5836691436CC

SEC