2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746697

Entity Name: THE PLACIDO GARDENS CONDOMINIUM ASSOCIATION, INC

FILED Feb 12, 2018 Secretary of State CC4239258135

Current Principal Place of Business:

QUALIFIED PROPERTY MANAGEMENT, INC 5901 US HWY 19 STE. 7Q
NEW PORT RICHEY, FL 34652

Current Mailing Address:

QUALIFIED PROPERTY MANAGEMENT, INC 5901 US HWY 19 STE. 7Q NEW PORT RICHEY, FL 34652 US

FEI Number: 59-1948825 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT, INC. QUALIFIED PROPERTY MANAGEMENT, INC 5901 US HWY 19 STE. 7Q NEW PORT RICHEY, FL 34652 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: MARY A. WHITE 02/12/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

 Title
 PRESIDENT
 Title
 VICE PRESIDENT

 Name
 RABENECK, KARL
 Name
 BEAULIEU, RYAN

Address QUALIFIED PROPERTY Address QUALIFIED PROPERTY MANAGEMENT, INC MANAGEMENT, INC

5901 US HWY 19 STE. 7Q 5901 US HWY 19 STE. 7Q

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

Title SECRETARY, TREASURER Title DIRECTOR

Name SPITZER, JASON Name SMITH, CHARLES

Address QUALIFIED PROPERTY Address QUALIFIED PROPERTY

MANAGEMENT, INC
5901 US HWY 19 STE. 7Q
5901 US HWY 19 STE. 7Q
5901 US HWY 19 STE. 7Q

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

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.

Electronic Signature of Signing Officer/Director Detail