

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747219

FILED
Apr 10, 2018
Secretary of State
CC7901282801**Entity Name:** LANDMARK TOWNHOUSES CONDOMINIUM ASSOCIATION,
INC**Current Principal Place of Business:**FIRST CHOICE PROPERTY MANAGEMENT
1489 W. PALMETTO PARK RD. SUITE 500
BOCA RATON, FL 33486**Current Mailing Address:**FIRST CHOICE PROPERTY MANAGEMENT
1489 W. PALMETTO PARK RD SUITE 500
BOCA RATON, FL 33486 US**FEI Number: 59-1944358****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LIPPMAN, STEVE
FIRST CHOICE PROPERTY MANAGEMENT GROUP
1489 W. PALMETTO PARK RD. SUITE 500
BOCA RATON, FL 33486 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	TREASURER
Name	OSMAN, OMAR
Address	1489 W. PALMETTO PARK RD. SUITE 500
City-State-Zip:	BOCA RATON FL 33486

Title	VP
Name	MARINO, ALBERT
Address	1489 W. PALMETTO PARK RD. SUITE 500
City-State-Zip:	BOCA RATON FL 33486

Title	DIRECTOR
Name	SCHNABEL, SONNY S.
Address	1489 W. PALMETTO PARK RD. SUITE 500
City-State-Zip:	BOCA RATON FL 33486

Title	PRESIDENT
Name	NICHOLSON, THOMAS
Address	1489 W. PALMETTO PARK RD. SUITE 500
City-State-Zip:	BOCA RATON FL 33486

Title	SECRETARY
Name	IVANKOVIC, IRMA
Address	1489 W. PALMETTO PARK RD. SUITE 500
City-State-Zip:	BOCA RATON FL 33486

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: THOMAS NICHOLSON**PRESIDENT****04/10/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date