

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747633

FILED
Mar 27, 2024
Secretary of State
0179665567CC

Entity Name: ASBURY ARMS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DRIVE., SUITE 260
CLEARWATER, FL 33762

Current Mailing Address:

C/O CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DRIVE., SUITE 260
CLEARWATER, FL 33762 US

FEI Number: 59-2005507

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZACUR & GRAHAM, P.A.
5200 CENTRAL AVE
ST. PETERSBURG, FL 33707 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: RICHARD ZACUR 03/27/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title	DIRECTOR	Title	PRESIDENT
Name	MORTA, DOMONIC	Name	MCCARTHY, KATHLEEN
Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE., SUITE 260	Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE., SUITE 260
City-State-Zip:	CLEARWATER FL 33762	City-State-Zip:	CLEARWATER FL 33762
Title	TREASURER	Title	VP
Name	MCCARTHY, PATRICIA	Name	BAJRIC, EDDIE
Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE., SUITE 260	Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE., SUITE 260
City-State-Zip:	CLEARWATER FL 33762	City-State-Zip:	CLEARWATER FL 33762
Title	SECRETARY		
Name	FLOWER, KAREN		
Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE., SUITE 260		
City-State-Zip:	CLEARWATER FL 33762		

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: MCCARTHY , KATHLEEN PRESIDENT 03/27/2024

Electronic Signature of Signing Officer/Director Detail Date