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: ANDREA BUTLER

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 749627 Entity Name: TOWNHOMES OF AUDUBON ASSOCIATION, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

381 N KROME AVENUE #205 HOMESTEAD, FL 33030

Current Mailing Address:

381 N KROME AVENUE #205 HOMESTEAD, FL 33030

FEI Number: 59-2457678

Name and Address of Current Registered Agent:

SCHMATENBERG & ASSOCIATES 1533 SUNSET DRIVE MIAMI, FL 33143 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

Officer/Director Detail :

Title	PD	Title	SD
Name	BUTLER, ANDREA	Name	GRACIA, JASON
Address	381 N KROME AVENUE 205	Address	381 N KROME AVENUE 205
City-State-Zip:	HOMESTEAD FL 33030	City-State-Zip:	HOMESTEAD FL 33030
Title	TD		
Name	BEAUCHEA, MARILYN		
Address	381 N KROME AVENUE 205		
City-State-Zip:	HOMESTEAD FL 33030		

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

Apr 28, 2017 Secretary of State CC4511929259

FILED

Certificate of Status Desired: No

04/28/2017 Date

Date

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