2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749974

Entity Name: TRAWLER VILLAGE CONDOMINIUM ASSOCIATION, INC.

FILED Mar 18, 2020 Secretary of State 1533229474CC

Current Principal Place of Business:

C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE

FORT MYERS, FL 33907

Current Mailing Address:

C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE FORT MYERS, FL 33907 US

FEI Number: 59-1880460 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STROHM, JOHN C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE FORT MYERS, FL 33907 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: JOHN STROHM 03/18/2020

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title VICE PRESIDENT

Name KUPFERBERG, ROBERT Name MILLS, TOM

C/O ALLIANT PROPERTY Address Address C/O ALLIANT PROPERTY

MANAGEMENT, LLC MANAGEMENT, LLC 13831 VECTOR AVENUE 13831 VECTOR AVENUE

FORT MYERS FL 33907 FORT MYERS FL 33907 City-State-Zip: City-State-Zip:

Title **SECRETARY** Title **TREASURER**

HENDERSON, BROCK Name CARLSON, ROBERT Name

C/O ALLIANT PROPERTY Address C/O ALLIANT PROPERTY Address

> MANAGEMENT, LLC MANAGEMENT, LLC 13831 VECTOR AVENUE 13831 VECTOR AVENUE

FORT MYERS FL 33907 City-State-Zip: FORT MYERS FL 33907

City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR**

Name WHITCOMB, JUDY Name PREWITT. ALLEN

C/O ALLIANT PROPERTY C/O ALLIANT PROPERTY Address Address

MANAGEMENT, LLC MANAGEMENT, LLC

13831 VECTOR AVENUE 13831 VECTOR AVENUE

City-State-Zip: FORT MYERS FL 33907 City-State-Zip: FORT MYERS FL 33907

Title **DIRECTOR**

PARSONS, JAMES Name

Address C/O ALLIANT PROPERTY

> MANAGEMENT, LLC 13831 VECTOR AVENUE

FORT MYERS FL 33907 City-State-Zip:

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.

03/18/2020 SIGNATURE: ROBERT KUPFERBERG PRESIDENT