

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750823

Entity Name: TOWNHOUSES AT REDBRIDGE ASSOCIATION, INC.**Current Principal Place of Business:**C/O CCM, INC.
7124 N. NOB HILL ROAD
TAMARAC, FL 33321**Current Mailing Address:**C/O CCM, INC.
7124 N. NOB HILL ROAD
TAMARAC, FL 33321 US**FEI Number:** 59-2039822**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRIPP SCOTT, P.A.
110 SE 6TH STREET - 15TH FLOOR
FORT LAUDERDALE, FL 33301 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	PRESIDENT
Name	SAWYER, SEAN
Address	C/O CCM, INC. 7124 N. NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321

Title	SECRETARY
Name	NARANJO, GREGORY
Address	C/O CCM, INC. 7124 N. NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321

Title	VP
Name	CHEJANOVSKI, ARLENE
Address	C/O CCM, INC. 7124 N. NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321

Title	TREASURER
Name	BUCKLER, KIRSTEN
Address	C/O CCM, INC. 7124 N. NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321

Title	DIRECTOR
Name	COLADO, DENNIS
Address	C/O CCM, INC. 7124 N. NOB HILL ROAD
City-State-Zip:	TAMARAC FL 33321

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: SEAN SAWYER

PRES

02/12/2020

Electronic Signature of Signing Officer/Director Detail_____
Date