## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 751163** 

Entity Name: EAGLE'S POINT CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 14, 2017
Secretary of State
CC0891714713

## **Current Principal Place of Business:**

720 BROOKER CREEK BLVD - STE. 206 OLDSMAR. FL 34677

## **Current Mailing Address:**

720 BROOKER CREEK BLVD - STE. 206 OLDSMAR, FL 34677 US

FEI Number: 59-2497381 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SCANNAVINO, INC. 720 BROOKER CREEK BLVD - STE. 206 OLDSMAR, FL 34677 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 PD Title VD

Name CONNOLLY, NOREEN Name SKVIRBLYS, SANDRA

Address 720 BROOKER CREEK BLVD - STE. Address 720 BROOKER CREEK BLVD - STE.

City-State-Zip: OLDSMAR FL 34677 City-State-Zip: OLDSMAR FL 34677

Title SECRETARY Title TREASURER

Name CORDERO, MARY Name COMO, DEBORAH

Address 5837 TROUBLE CREEK RD. Address 5837 TROUBLE CREEK RD.

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

Title D

Name CONNER, LORRIE

Address 720 BROOKER CREEK BLVD - STE.

206

City-State-Zip: OLDSMAR FL 34677

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: NOREEN CONNOLLY PRESIDENT

Electronic Signature of Signing Officer/Director Detail

03/14/2017 Date