

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752324

Entity Name: TOWNHOUSE VILLAS SOBRE DEL MAR PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Jan 28, 2020
Secretary of State
4262080580CC**Current Principal Place of Business:**628 SE 5TH STREET
#3
DELRAY BEACH, FL 33483-5249**Current Mailing Address:**628 SE 5TH STREET
#3
DELRAY BEACH, FL 33483-5249 US**FEI Number: 26-2385789****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JOHNSON, LISA
628 SE 5TH STREET
UNIT 3
DELRAY BEACH, FL 33483 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: STEVE MIDLARSKY****01/28/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT/DIRECTOR
Name	WILLIAMS, LAURA
Address	628 SE 5TH STREET UNIT 5
City-State-Zip:	DELRAY BEACH FL 33483
Title	VICE-PRESIDENT/DIRECTOR
Name	FIGUERAS, MICHELLE
Address	628 SE 5TH STREET UNIT 2
City-State-Zip:	DELRAY BEACH FL 33483
Title	SECRETARY/DIRECTOR
Name	POTTER, ANN
Address	628 SE 5TH STREET UNIT 4
City-State-Zip:	DELRAY BEACH FL 33483-5249

Title	VICE-TREASURER/DIRECTOR
Name	JOHNSON, LISA
Address	628 SE 5 STREET UNIT 3
City-State-Zip:	DELRAY BEACH FL 33483
Title	TREASURER/DIRECTOR
Name	JOHNSON, LISA
Address	628 SE 5TH STREET UNIT 3
City-State-Zip:	DELRAY BEACH FL 33483

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: LISA JOHNSON**TREASURER****01/28/2020**

Electronic Signature of Signing Officer/Director Detail

Date