## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 756070** 

Entity Name: EASTWOOD SHORES CONDOMINIUM NO. 6 ASSOCIATION,

INC.

FILED
Mar 06, 2024
Secretary of State
3744299754CC

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

24701 US HIGHWAY 19 NORTH

SUITE 102

CLEARWATER, FL 33763

## **Current Mailing Address:**

24701 US HIGHWAY 19 NORTH SUITE 102 CLEARWATER, FL 33763 US

FEI Number: 59-2069873 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LOVETERE, JULIE 24701 US HIGHWAY 19 NORTH SUITE 102 CLEARWATER, FL 33763 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: JULIE LOVETERE 03/06/2024

Electronic Signature of Registered Agent Date

City-State-Zip:

CLEARWATER FL 33763

Officer/Director Detail:

Title PD Title VPD

Name GANGE, PHILIP Name PALERMITI, DAVID

Address 24701 US HIGHWAY 19 NORTH Address 24701 US HIGHWAY 19 NORTH

SUITE 102 SUITE 102

City-State-Zip: CLEARWATER FL 33763 City-State-Zip: CLEARWATER FL 33763

Title TD Title SD

Name HERMANN, KELLY Name MIKOLSJCZYK, KIM

Address 24701 US HIGHWAY 19 NORTH Address 24701 US HIGHWAY 19 NORTH

SUITE 102 SUITE 102

Title DIR

City-State-Zip:

Name SMITH, JENNIFER

Address 24701 US HIGHWAY 19 NORTH

CLEARWATER FL 33763

SUITE 102

City-State-Zip: CLEARWATER FL 33763

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: PHILIP GANGE PD 03/06/2024