

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756923

**Entity Name:** EL GALEON SOUTH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3754 CAPE HAZE DR  
ROTONDA WEST, FL 33946**Current Mailing Address:**PO BOX 3085  
PLACIDA, FL 33946 US**FEI Number:** 59-2194084**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FREEMAN, PAUL T  
3754 CAPE HAZE DR  
ROTONDA WEST, FL 33947 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:** PAUL T FREEMAN

04/19/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name ASHBY, ROD  
Address PO BOX 3085  
City-State-Zip: PLACIDA FL 33946

Title PRESIDENT  
Name GREENE, TIMOTHY  
Address PO BOX 3085  
City-State-Zip: PLACIDA FL 33946

Title DIRECTOR  
Name MIELECKI, TOM  
Address PO BOX 3085  
City-State-Zip: PLACIDA FL 33946

Title TREASURER  
Name SCHAFER, TOM  
Address PO BOX 3085  
City-State-Zip: PLACIDA FL 33946

Title SECRETARY  
Name DENMAN-THOMPSON, RENEE  
Address PO BOX 3085  
City-State-Zip: PLACIDA FL 33946

*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:** TIMOTHY GREENE

PRESIDENT

04/19/2023

Electronic Signature of Signing Officer/Director Detail

Date