

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759183

Entity Name: MARKER "5" CONDOMINIUM ASSOCIATION, INC.

FILED
Feb 15, 2017
Secretary of State
CC4670009903

Current Principal Place of Business:

QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY 19 STE. 7Q
NEW PORT RICHEY, FL 34652

Current Mailing Address:

QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY 19 STE. 7Q
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2105474

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT, INC.
QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY 19 STE. 7Q
NEW PORT RICHEY, FL 34652 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: MARY A. WHITE

02/15/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MELENDEZ, AL
Address QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

Title PRESIDENT
Name WILSON, GARY
Address QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

Title TREASURER
Name WISE, THOMAS
Address QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

Title SECRETARY
Name HEINTZ, SUE
Address QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

Title VP
Name SUSSMAN, JOEL
Address QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY 19 STE. 7Q
City-State-Zip: NEW PORT RICHEY FL 34652

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: GARY WILSON

PRESIDENT

02/15/2017

Electronic Signature of Signing Officer/Director Detail

Date