## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 763407** 

Entity Name: CALOOSA COUNTRY CLUB ESTATES PROPERTY OWNERS

ASSOCIATION, INC.

**FILED** Mar 12, 2018

**Secretary of State** 

CC3127751118

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

2005 EAST VIEW DRIVE SUN CITY CENTER, FL 33573

# **Current Mailing Address:**

P.O. BOX 5143

SUN CITY CENTER, FL 33591-5143

FEI Number: 59-2529059 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

RUVEN, GRACEANN 2005 EAST VIEW DRIVE SUN CITY CENTER, FL 33573 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: GRACEANN RUVEN 03/12/2018

> Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title **TREASURER** Title **PRESIDENT** 

Name RUVEN, GRACEANN Name SMITHYMAN, MERLENE Address 2005 EAST VIEW DRIVE Address 1927 EAST VIEW DRIVE

City-State-Zip: SUN CITY CENTER FL 33573 City-State-Zip: SUN CITY CENTER FL 33573

VΡ Title **DIRECTOR** Title

FIORELLI, JUNE Name MCLOUGHLIN, IRIS Name

Address 1924 EAST VIEW DRIVE Address 1928 EAST VIEW DRIVE

City-State-Zip: SUN CITY CENTER FL 33573 City-State-Zip: SUN CITY CENTER FL 33573

Title **SECRETARY** Title DIRECTOR

Name GLASSMAN, BARRY Name ORANZI, ROBERT Address 1909 EAST VIEW DRIVE 1711 WEDGE COURT Address

City-State-Zip: SUN CITY CENTER FL 33573 SUN CITY CENTER FL 33573 City-State-Zip:

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: GRACEANN RUVEN

**TREASURER** 

03/12/2018