

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005816

**Entity Name:** MIROMAR LAKES MASTER ASSOCIATION, INC.**Current Principal Place of Business:**10801 CORKSCREW RD  
STE 305  
ESTERO, FL 33928**Current Mailing Address:**10801 CORKSCREW RD  
STE 305  
ESTERO, FL 33928**FEI Number:** 59-3678036**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GESCHWENDT, MARK  
10801 CORKSCREW RD  
STE 305  
ESTERO, FL 33928 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PD
Name	BYAL, TIM
Address	10801 CORKSCREW RD STE 305
City-State-Zip:	ESTERO FL 33928

Title	TD
Name	POMEROY, RICH
Address	10801 CORKSCREW RD STE 305
City-State-Zip:	ESTERO FL 33928

Title	DIRECTOR
Name	SHARP, LORI
Address	10801 CORKSCREW RD STE 305
City-State-Zip:	ESTERO FL 33928

Title	VD
Name	ELGIN, MICHAEL
Address	10801 CORKSCREW RD STE 305
City-State-Zip:	ESTERO FL 33928

Title	S
Name	GRASSI, SHANNA
Address	18061 MIROMAR LAKES PKWY
City-State-Zip:	MIROMAR LAKES FL 33913

*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:** TIM BYAL

PRESIDENT

03/02/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date