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.

PD

#### SIGNATURE: TURI GALBRAITH

Electronic Signature of Signing Officer/Director Detail

# 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N01000001628

### Entity Name: CARRIAGE PARK CONDOMINIUM ASSOCIATION, INC.

### Current Principal Place of Business:

137 S. COURTENAY PKWY #683 MERRITT ISLAND, FL 32952

### **Current Mailing Address:**

137 S. COURTENAY PKWY #683 MERRITT ISLAND, FL 32952 US

### FEI Number: 59-3701377

### Name and Address of Current Registered Agent:

TCB PROPERTY MANAGEMENT 137 S. COURTENAY PKWY 683 MERRITT ISLAND, FL 32952 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

Officer/Director Detail :			
Title	DIRECTOR	Title	TREASURER
Name	LIND, JOHN	Name	STAACK, HAROLD
Address	P.O. BOX 410708	Address	601 TROTTER LANE #102
City-State-Zip:	MELBOURNE FL 32941	City-State-Zip:	MELBOURNE FL 32940
Title	PRESIDENT	Title	SECRETARY
Name	GALBRAITH, TURI	Name	MIHORA, MICHAEL
Address	400 TROTTER LANE #204	Address	700 TROTTER LANE #101
City-State-Zip:	MELBOURNE FL 32940	City-State-Zip:	MELBOURNE FL 32940

Certificate of Status Desired: No

FILED Feb 08, 2018 Secretary of State CC0718597454

> 02/08/2018 Date

Date