

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000003518

**Entity Name:** IRON HORSE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**May 07, 2020**  
**Secretary of State**  
**3919010065CC**

**Current Principal Place of Business:**

1207 N HIMES AVE  
STE 3  
TAMPA, FL 33607

**Current Mailing Address:**

1207 N HIMES AVE  
STE 3  
TAMPA, FL 33607 US

**FEI Number:** 20-0042195

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNIQUE PROPERTY SERVICES, INC  
1207 N HIMES AVE  
STE 3  
TAMPA, FL 33607 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:** MARION MAY

05/07/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           FERGUSON, DEBORAH  
Address        15439 LAKE MAGDALENE BLVD  
City-State-Zip: TAMPA FL 33613

Title           VP  
Name           PARKES, ALAN  
Address        795 N WHITETAIL DR  
City-State-Zip: FRANKTOWN CO 80116

Title           SECRETARY  
Name           MAY, MARION  
Address        1806 HORSEBACK TRAIL  
City-State-Zip: VIENNA VA 22182

Title           MANAGER  
Name           MALLORY, CORINNE  
Address        1207 N HIMES AVE  
                  STE.3  
City-State-Zip: TAMPA FL 33607

Title           PRESIDENT  
Name           BREIER, GAARIE  
Address        320 10TH AVENUE NORTH  
City-State-Zip: INDIAN ROCKS BEACH FL 33785

*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:** MALLORY, CORINNE

MANAGER

05/07/2020

Electronic Signature of Signing Officer/Director Detail

Date