

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007307

Entity Name: EMERALD ISLAND RESORT MASTER ASSOCIATION, INC.

Current Principal Place of Business:

2751 EMERALD ISLAND BLVD
KISSIMMEE, FL 34747

Current Mailing Address:

2113 RUBY RED BLVD, STE B
CLERMONT, FL 34714 US

FEI Number: 01-0595456

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EXTREME MANAGEMENT TEAM, LLC
2113 RUBY RED BLVD, STE B
CLERMONT, FL 34714 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: TAMMY HARDT

02/07/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PUMA, JULIAN S
Address 2113 RUBY RED BLVD, STE B
City-State-Zip: CLERMONT FL 34714

Title DIRECTOR
Name MOORE, GAVIN
Address 2113 RUBY RED BLVD, STE B
City-State-Zip: CLERMONT FL 34714

Title DIRECTOR
Name FORD, STEVE
Address 2113 RUBY RED BLVD, STE B
City-State-Zip: CLERMONT FL 34714

Title DIRECTOR
Name LOCKWOOD, TOM
Address 2751 EMERALD ISLAND BLVD
City-State-Zip: KISSIMMEE FL 34747

Title VP
Name BROWN, TAMI
Address 2751 EMERALD ISLAND BLVD
City-State-Zip: KISSIMMEE FL 34747

Title SECRETARY
Name DONNELLY, JOAN
Address 2751 EMERALD ISLAND BLVD
City-State-Zip: KISSIMMEE FL 34747

Title PRESIDENT
Name WARNER, ARTHUR
Address 2113 RUBY RED BLVD, STE B
City-State-Zip: CLERMONT FL 34714

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: ARTHURE WARNER

PRESIDENT

02/07/2018

Electronic Signature of Signing Officer/Director Detail

Date