

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000906

Entity Name: AVENDALE OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**18550 NORTH DALE MABRY HIGHWAY
LUTZ, FL 33548**Current Mailing Address:**C/O WISE PROPERTY MANAGEMENT, INC.
18550 NORTH DALE MABRY HIGHWAY
LUTZ, FL 33548 US**FEI Number:** 04-3619183**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GLAUSIER, CHARLES E
400 N. ASHLEY DRIVE
SUITE 2020
TAMPA, FL 33602 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	PRESIDENT
Name	JONES, JUSTIN
Address	18550 NORTH DALE MABRY HIGHWAY
City-State-Zip:	LUTZ FL 33548

Title	VP
Name	HAMILTON, JASON
Address	18550 NORTH DALE MABRY HIGHWAY
City-State-Zip:	LUTZ FL 33548

Title	TREASURER
Name	ISHAK, ANTOINE
Address	18550 NORTH DALE MABRY HIGHWAY
City-State-Zip:	LUTZ FL 33548

Title	SECRETARY
Name	MILLER, JAYNIE
Address	18550 NORTH DALE MABRY HIGHWAY
City-State-Zip:	LUTZ FL 33548

Title	DIRECTOR
Name	RODE, JANET
Address	18550 NORTH DALE MABRY HIGHWAY
City-State-Zip:	LUTZ FL 33548

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: JUSTIN JONES

PRESIDENT

04/07/2021

Electronic Signature of Signing Officer/Director Detail

Date