

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005876

Entity Name: PARK PLACE TOWNHOMES PROPERTY OWNERS
ASSOCIATION, INC.**FILED**
Mar 04, 2019
Secretary of State
7693639298CC**Current Principal Place of Business:**C/O CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DR STE 260
CLEARWATER, FL 33762**Current Mailing Address:**C/O CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DR STE 260
CLEARWATER, FL 33762 US**FEI Number: 56-2302426****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**COSTIS, P.A., ZACUR, GRAHAM &
5200 CENTRAL AVENUE
ST. PETERSBURG, FL 33733 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: ZACUR, GRAHAM & COSTIS, P.A.****03/04/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	ROYAL, LAURA
Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR STE 260
City-State-Zip:	CLEARWATER FL 33762

Title	TREASURER
Name	D'ALESSIO, MICHELLE
Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR STE 260
City-State-Zip:	CLEARWATER FL 33762

Title	SECRETARY
Name	URBAN, CATHERINE
Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR STE 260
City-State-Zip:	CLEARWATER FL 33762

Title	VP
Name	PRUTSMAN, MARK
Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR STE 260
City-State-Zip:	CLEARWATER FL 33762

Title	DIRECTOR
Name	IMBERGAMO, CHARLES
Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR STE 260
City-State-Zip:	CLEARWATER FL 33762

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: LAURA ROYAL**PRESIDENT****03/04/2019**

Electronic Signature of Signing Officer/Director Detail

Date