

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005876

Entity Name: PARK PLACE TOWNHOMES PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Mar 29, 2023
Secretary of State
9561788238CC**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:**ZACUR AND GRAHAM, P.A.
5200 CENTRAL AVENUE
ST. PETERSBURG, FL 33707 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: RICHARD ZACUR****03/29/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

Title	PRESIDENT
Name	LANATA, CONSTANZA
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: CONSTANZA LANATA**PRESIDENT****03/29/2023**

Electronic Signature of Signing Officer/Director Detail

Date