

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000005876

**FILED**  
**Feb 09, 2018**  
**Secretary of State**  
**CC9748328319**

**Entity Name:** PARK PLACE TOWNHOMES PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3001 EXECUTIVE DR  
STE 260  
CLEARWATER, FL 33762

**Current Mailing Address:**

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.

02/09/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ROYAL, LAURA  
Address 3001 EXECUTIVE DRIVE, SUITE 260  
City-State-Zip: CLEARWATER FL 33762

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

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

Title VP  
Name IMBERGAMO, CHARLES  
Address 3001 EXECUTIVE DR  
STE 260  
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR  
Name COOPER, GARY  
Address 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**

02/09/2018

Electronic Signature of Signing Officer/Director Detail

Date