

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000009177

**Entity Name:** PLACID LAKE TOWNHOMES PROPERTY OWNERS ASSOCIATION, INC.

**FILED**  
**Apr 28, 2019**  
**Secretary of State**  
**6691164538CC**

**Current Principal Place of Business:**

225 S WESTMONTE DR  
3310  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

P.O BOX 162147  
ALTAMONTE SPRINGS, FL 32716 US

**FEI Number: 41-2090641**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

VISTA COMMUNITY ASSOCIATION MANAGEMENT  
225 S WESTMONTE DR  
3310  
ALTAMONTE SPRINGS, FL 32714 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: TINA YAMADA**

**04/28/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PRESTI, KRISTA  
Address        P.O BOX 162147  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

Title            VP  
Name            BREWER, STEPHANIE  
Address        P.O BOX 162147  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

Title            SECRETARY  
Name            BONIFACIO, GRISEL  
Address        P.O BOX 162147  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

Title            TREASURER  
Name            VARELA, GERARDO  
Address        P.O BOX 162147  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

Title            DIRECTOR  
Name            BROWN, SHERON  
Address        P.O BOX 162147  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

*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: KRISTA PRESTI**

**PRESIDENT**

**04/28/2019**

Electronic Signature of Signing Officer/Director Detail

Date