## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02420

Entity Name: BOARDWALK HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 15, 2021
Secretary of State
4614736680CC

## **Current Principal Place of Business:**

CORNERSTONE PROPERTY SOLTUIONS 3700 NW 91ST STREET SUITE A100 GAINESVILLE, FL 32606

## **Current Mailing Address:**

CORNERSTONE PROPERTY SOLTUIONS 3700 NW 91ST STREET SUITE A100 GAINESVILLE, FL 32606 US

FEI Number: 59-2640815 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORNERSTONE PROPERTY SOLUTIONS OF NORTH CENTRAL FLORIDA, LLC. CORNERSTONE PROPERTY SOLTUIONS 3700 NW 91ST STREET SUITE A100 GAINESVILLE, FL 32606 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: EUGENE C. HAUFLER 04/15/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title SECRETARY

Name WARNER, SHELLEY Name KINDLAND, PATRICIA

Address CORNERSTONE PROPERTY Address CORNERSTONE PROPERTY

SOLTUIONS SOLTUIONS

3700 NW 91ST STREET SUITE A100 3700 NW 91ST STREET SUITE A100

City-State-Zip: GAINESVILLE FL 32606 City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR Title VP

Name WHIDDON, LINDA Name LOEBIG, MARK

Address CORNERSTONE PROPERTY Address CORNERSTONE PROPERTY SOLTUIONS SOLTUIONS

3700 NW 91ST STREET SUITE A100 3700 NW 91ST STREET SUITE A100

City-State-Zip: GAINESVILLE FL 32606 City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR Title TREASURER

Name ADAMS-JOHNSON, MICHELLE Name BRUCKER, SOPHIA

Address CORNERSTONE PROPERTY Address CORNERSTONE PROPERTY

SOUTIONS SOUTIONS

3700 NW 91ST ST, SUITE A100 3700 NW 91ST ST, SUITE A100

City-State-Zip: GAINESVILLE FL 32606 City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR

Name HATTON, RANDY

Address CORNERSTONE PROPERTY

**SOLUTIONS** 

3700 NW 91ST ST, A100

City-State-Zip: GAINESVILLE FL 32606

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: SHELLEY WARNER PRESIDENT 04/15/2021