## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02457

Entity Name: PINEBROOK TOWNE HOUSE ASSOCIATION, INC.

FILED
Apr 12, 2017
Secretary of State
CC3342253073

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

CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR. 260 CLEARWATER, FL 33762

## **Current Mailing Address:**

CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR. 260 CLEARWATER, FL 33762 US

FEI Number: 59-2478096 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ASSOCIATION ASSESSMENT ATTORNEY'S, PA 111 2ND AVENUE, NE 539

ST. PETERSBURG, FL 33701 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: ROBERT TODD 04/12/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title SECRETARY Title PRESIDENT

Name WOLFE, STEVEN Name OROPESA, HAYDEE

Address CONDOMINIUM ASSOCIATES Address CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. 260 3001 EXECUTIVE DR. 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR Title VP

Name PEVEHOUSE, CYNTHIA Name GUTHRIE, DEBORAH

Address CONDOMINIUM ASSOCIATES Address CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. 260 3001 EXECUTIVE DR. 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title TREASURER Title D

Name MACEY, DAVE Name STEVENSON, MATT

Address CONDOMINIUM ASSOCIATES Address CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. 260 3001 EXECUTIVE DR. 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title D

Name SMITH, SHERRY

Address CONDOMINIUM ASSOCIATES

3001 EXECUTIVE DR. 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: HAYDEE OROPESA PRESIDENT 04/12/2017