2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400003736

Entity Name: TOWNPARK MASTER ASSOCIATION, INC.

FILED Apr 28, 2021 **Secretary of State** 0791141223CC

Current Principal Place of Business:

11270 SW TOWNPARK AVENUE PORT ST LUCIE. FL 34987

Current Mailing Address:

11270 SW TOWNPARK AVENUE PORT ST LUCIE. FL 34987

FEI Number: 20-2729584 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE P.A. 2149 N COMMERCE PKWY WESTON, FL 33326 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title SECRETARY, TREASURER

CARTER, JOHN LEOLANI, GEVERS Name Name

4400 W SAMPLE ROAD, STE 200 Address 4400 W SAMPLE ROAD, STE 200 Address

City-State-Zip: COCONUT CREEK FL 33073 COCONUT CREEK FL 33401 City-State-Zip:

Title DIRECTOR Title VΡ Name

DI MATTIA, AJ Name SHUPING, MIKE

Address 11270 SW TOWNPARK AVENUE Address 4400 SAMPLE ROAD STF 200

PORT ST LUCIE FL 34987 City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip:

Title **DIRECTOR**

Name KERRIGAN, DONALD

Address 11270 SW TOWNPARK AVENUE

City-State-Zip: PORT ST LUCIE FL 34987

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.

04/28/2021 SIGNATURE: JOHN CARTER **PRESIDENT**