

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

DOCUMENT# N04000003736

**Entity Name:** TOWNPARK MASTER ASSOCIATION, INC.

**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.  
GLOBAL COMMERCE PKWY  
1900 N COMMERCE CENTER  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CARTER, JOHN  
Address        4400 W SAMPLE ROAD, STE 200  
City-State-Zip: COCONUT CREEK FL 33401

Title            DST  
Name            ASHBY, STEVE  
Address        4400 W SAMPLE ROAD, STE 200  
City-State-Zip: COCONUT CREEK FL 33073

Title            DV  
Name            STERN, JARED  
Address        4400 W SAMPLE ROAD, STE 200  
City-State-Zip: COCONUT CREEK FL 33073

Title            DIRECTOR  
Name            PAGAN, LUIS  
Address        11465 SW FIELDSTONE WAY  
City-State-Zip: PORT ST. LUCIE FL 34987

Title            DIRECTOR  
Name            CROCE, KYLE  
Address        11186 SW WYNDHAM WAY  
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.*

**SIGNATURE:** JOHN CARTER

**PRESIDENT**

**01/16/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date