

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006986

Entity Name: COVERED BRIDGE TOWNHOMES PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Jan 31, 2023
Secretary of State
3694381719CC**Current Principal Place of Business:**24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763**Current Mailing Address:**24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763 US**FEI Number: 20-2105378****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LOVETERE, JULIE
24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763 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: JULIE LOVETERE****01/31/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	OLSON, BRIAN
Address	24701 US HIGHWAY 19 N SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	VPD
Name	FERGUSON, SCOTT
Address	24701 US HIGHWAY 19 N SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	DIR
Name	AMBROSIO, RON
Address	24701 US HIGHWAY 19 N SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	TD
Name	POPPEL, BARRY
Address	24701 US HIGHWAY 19 N SUITE 102
City-State-Zip:	CLEARWATER FL 33763

Title	SD
Name	MURACO, LAURA
Address	24701 US HIGHWAY 19 N SUITE 102
City-State-Zip:	CLEARWATER FL 33763

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: BRIAN OLSON**PD****01/31/2023**

Electronic Signature of Signing Officer/Director Detail

Date