

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000011070

**FILED**  
**Apr 05, 2022**  
**Secretary of State**  
**2091089911CC**

**Entity Name:** SAN PALERMO AT SARASOTA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2477 STICKNEY POINT ROAD  
SUITE 118A  
SARASOTA, FL 34231

**Current Mailing Address:**

2477 STICKNEY POINT ROAD  
SUITE 118A  
SARASOTA, FL 34231

**FEI Number:** 59-3789363

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ARGUS PROPERTY MANAGEMENT  
2477 STICKNEY POINT ROAD  
SUITE 118A  
SARASOTA, FL 34231 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:** DEBORAH GIFFORD

04/05/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           ETTEN, KEN  
Address        2477 STICKNEY POINT ROAD  
                  SUITE 118A  
City-State-Zip: SARASOTA FL 34231

Title           PRESIDENT  
Name           MAXWELL, ANNE  
Address        2477 STICKNEY POINT ROAD  
                  SUITE 118A  
City-State-Zip: SARASOTA FL 34231

Title           SECRETARY  
Name           SOUDIJN, DEVINN  
Address        2477 STICKNEY POINT ROAD  
                  SUITE 118A  
City-State-Zip: SARASOTA FL 34231

Title           DIRECTOR  
Name           ABIERA-SALIS, ARLENE  
Address        2477 STICKNEY POINT ROAD  
                  SUITE 118A  
City-State-Zip: SARASOTA FL 34231

Title           VP  
Name           ENGLAND, CHARLOTTE  
Address        2477 STICKNEY POINT ROAD  
                  SUITE 118A  
City-State-Zip: SARASOTA FL 34231

*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:** ANNE MAXWELL

PRESIDENT

04/05/2022

Electronic Signature of Signing Officer/Director Detail

Date